- 1 CABINET FOR HEALTH AND FAMILY SERVICES
- 2 Department for Medicaid Services
- 3 Division of Community Alternatives
- 4 907 KAR 12:010. New supports for community living waiver service and coverage
- 5 policies.
- 6 RELATES TO: KRS 205.520, 205.5605, 205.5606, 205.5607, 42 C.F.R. 441 Subpart
- 7 G, 42 U.S.C. 1396a, b, d, n
- 8 STATUTORY AUTHORITY: KRS 194A.030(2), 194A.050(1), 205.520(3),
- 9 205.5606(1), 205.6317
- NECESSITY, FUNCTION, AND CONFORMITY: The Cabinet for Health and Family
- 11 Services, Department for Medicaid Services, has responsibility to administer the Medi-
- caid Program. KRS 205.520(3) authorizes the cabinet, by administrative regulation, to
- comply with any requirement that may be imposed, or opportunity presented, by federal
- law to qualify for federal Medicaid funds. KRS 205.5606(1) requires the cabinet to
- promulgate administrative regulations to establish a consumer-directed services pro-
- gram to provide an option for the home and community based services waivers. This
- administrative regulation establishes the service and coverage policies for a new ver-
- sion of the Supports for Community Living (SCL) waiver program and applies to SCL
- waiver services covered pursuant to this administrative regulation rather than SCL
- waiver services covered pursuant to 907 KAR 1:145. The SCL waiver program is feder-
- 21 ally authorized via a 1915(c) home and community based waiver which enables

- individuals with an intellectual or developmental disability to reside and receive services
- in a community setting rather than in an intermediate care facility for individuals with an
- intel lectual or developmental disability, including a consumer directed option pursuant
- 4 to KRS 205.5606.
- 5 Section 1. Definitions. (1) "1915(c) home and community based waiver program"
- 6 means a Kentucky Medicaid program established pursuant to, and in accordance with,
- 7 42 U.S.C. 1396n(c).
- 8 (2) "Abuse" is defined by KRS 209.020(8).
- 9 (3) "Adult day health care center" means an adult day health care center licensed in
- accordance with 902 KAR 20:066.
- 11 (4) "Adult foster care home" means a home:
- 12 (a) Not owned or leased by an SCL provider;
- (b) In which a participant:
- 1. Is at least eighteen (18) years of age; and
- 2. Receives SCL services and resides in the family occupied (leased or owned)
- 16 home; and
- 17 (c) In which the family:
- 1. Includes the participant in the family's household routines;
- 19 2. Provides training and supervision; and
- 3. Ensures that the participant's needs are met in accordance with the:
- a. Participant's plan of care; and
- b. Supports for Community Living Policy Manual.
- (5) "Behavior intervention committee" or "BIC" means a group of individuals:

- 1 (a) Established to evaluate the technical adequacy of a proposed behavioral inter-
- vention for a participant; and
- 3 (b) Which meets in accordance with the BIC policies established in the Supports for
- 4 Community Living Manual.
- 5 (6) "Board" means three (3) meals a day or other full nutritional regimen of a caregiv-
- 6 er for the purpose of providing shared living services.
- 7 (7) "Case manager" means an individual who:
- 8 (a) Works closely with a participant to ensure that the:
- 9 1. Participant's person centered plan of care focuses on the participant's ongoing ex-
- pectations and satisfaction with the participant's life; and
- 2. Participant maintains the freedom of choice of providers in a conflict free climate;
- 12 (b)1. Has a bachelor's or higher degree in a human service field from an accredited
- 13 college or university;
- 2. Has a bachelor's degree in any other field from an accredited college or university
- with at least one (1) year of experience in the field of intellectual disability; or
- 3. Is a registered nurse who has at least one (1) year of experience as a professional
- 17 nurse in the field of intellectual disability;
- 18 (c) Shall be supervised by a case management supervisor; and
- (d) Meets all personnel and training requirements established in Section 3 of this ad-
- 20 ministrative regulation.
- 21 (8) "Case manager supervisor" means an individual who:
- 22 (a) Provides professional oversight of case managers;
- 23 (b)1. Has a bachelor's or higher degree in a human service field from an accredited

- 1 college or university;
- 2. Has a bachelor's degree in any other field from an accredited college or university
- with at least one (1) year of experience in the field of intellectual disability; or
- 4 3. Is a registered nurse;
- 5 (c) Has at least two (2) years of experience of case management responsibility in an
- organization which serves individuals with intellectual or developmental disabilities;
- 7 (d) Completes a case management supervisory training curriculum approved by
- 8 DBHDID within six (6) months of beginning supervisory responsibilities;
- 9 (e) Meets all personnel and training requirements established in Section 3 of this ad-
- 10 ministrative regulation; and
- (f) Participates in six (6) hours per year of professional development or continuing
- education in the areas of person centered processes, supervision, and mentoring of
- 13 employees.
- (9) "Certified nutritionist" is defined by KRS 310.005(12).
- (10) "Certified psychologist with autonomous functioning" means a person licensed
- 16 pursuant to KRS 319.056.
- 17 (11) "Certified school psychologist" means an individual certified by the Kentucky Ed-
- ucation Professional Standards Board under 16 KAR 2:090.
- 19 (12) "Chemical restraint" means the use of over-the-counter or prescription medica-
- 20 tion to control a participant or participant's behavior:
- (a) For the convenience of staff; or
- 22 (b) As a punishment.
- 23 (13) "Community access specialist" means an individual who:

- 1 (a) Provides support and training to a participant that empowers the participant to:
- Participate in meaningful routines or events;
- 2. Hold a membership in a club, group, association, church, business, or organization
- 4 in the community; and
- 5 3. Build a natural support system;
- 6 (b) Has:
- 7 1. A bachelor's degree in a human services field from an accredited college or uni-
- 8 versity;
- 2. A bachelor's degree in any other field from an accredited college or university plus
- at least one (1) year of experience in the field of intellectual or developmental disability;
- 11 or
- 3. Relevant experience or credentialing that will substitute for the educational re-
- quirements stated in subparagraph 1. or 2. of this paragraph on a year-for-year basis;
- 14 and
- (c) Meets the personnel and training requirements established in Section 3 of this
- 16 administrative regulation.
- 17 (14) "Community guide" means an individual who:
- (a) Has been selected by a participant to provide training, technical assistance, and
- support including individual budget development and implementation in aspects of par-
- 20 ticipant direction; and
- 21 (b) Has:
- 1. A bachelor's degree in a human services field from an accredited college or uni-
- 23 versity;

- 2. A bachelor's degree in any other field from an accredited college or university plus
- at least one (1) year of experience in the field of intellectual or developmental disability;
- 3 or
- 3. Relevant experience or credentialing that will substitute for the educational re-
- 5 quirements stated in subparagraph 1. or 2. of this paragraph on a year-for-year basis;
- 6 (c) Meets the personnel and training requirements established in Section 3 of this
- 7 administrative regulation;
- 8 (d) Completes a community guide training curriculum approved by DBHDID within six
- 9 (6) months of being employed by the first participant supported; and
- (e) Provides services to a participant in accordance with Section 4 of this administra-
- 11 tive regulation.
- (15) "Conflict free" means a scenario in which an agency, including any subsidiary,
- partnership, not-for-profit, or other business entity under control of the agency, providing
- case management to an individual does not also provide another waiver service to the
- 15 individual.
- (16) "Controlled substance" is defined by KRS 218A.010(6).
- 17 (17) "Covered services and supports" is defined by KRS 205.5605(3).
- (18) "DBHDID" means the Department for Behavioral Health, Developmental and In-
- 19 tellectual Disabilities.
- 20 (19) "DCBS" means the Department for Community Based Services.
- 21 (20) "Department" means the Department for Medicaid Services or its designee.
- 22 (21) "Developmental disability" means a disability that:
- 23 (a) Is manifested prior to the age of twenty-two (22);

- 1 (b) Constitutes a substantial disability to the affected individual; and
- 2 (c) Is attributable either to an intellectual disability or a condition related to an intellec-
- 3 tual disability that:
- 4 1. Results in an impairment of general intellectual functioning and adaptive behavior
- 5 similar to that of a person with an intellectual disability; and
- 2. Is a direct result of, or is influenced by, the person's cognitive deficits.
- 7 (22) "Direct support professional" means an individual who:
- 8 (a) Provides services to a participant in accordance with Section 4 of this administra-
- 9 tive regulation;
- (b) Has direct contact with a participant when providing services to the participant;
- 11 (c) Is at least:
- 1. Eighteen (18) years old and has a high school diploma or GED; or
- 13 2. Twenty-one (21) years old;
- (d) Meets the personnel and training requirements established in Section 3 of this
- administrative regulation;
- (e) Has the ability to:
- 1. Communicate effectively with a participant and the participant's family;
- 2. Read, understand, and implement written and oral instructions;
- 19 3. Perform required documentation; and
- 4. Participate as a member of the participant's person centered team if requested by
- 21 the participant; and
- 22 (f) Demonstrates competence and knowledge on topics required to safely support the
- 23 participant as described in the participant's person centered plan of care.

- 1 (23) "Direct support professional supervisor" means an individual who:
- 2 (a) Provides oversight of direct support professionals in the provision of services to
- 3 participants;
- 4 (b) Is at least:
- 1. Eighteen (18) years old and has a high school diploma or GED; or
- 6 2. Twenty-one (21) years old;
- 7 (c) Meets the personnel and training requirements established in Section 3 of this
- 8 administrative regulation;
- 9 (d) Has the ability to:
- 1. Communicate effectively with a participant and the participant's family;
- 2. Read, understand, and implement written and oral instructions;
- 3. Perform required documentation; and
- 4. Participate as a member of the participant's person centered team if requested by
- 14 the participant;
- (e) Has at least two (2) years of experience in providing direct support to persons
- with a developmental disability;
- (f) Demonstrates competence and knowledge on topics required to safely support the
- participant as described in the participant's person centered plan of care; and
- (g) Completes a supervisory training curriculum approved by DBHDID within six (6)
- 20 months of beginning supervisory responsibilities.
- 21 (24) "Drug paraphernalia" is defined by KRS 218A.500(1).
- 22 (25) "Early and periodic screening, diagnostic, and treatment services" is defined by
- 23 42 U.S.C. 1396d(r).

- 1 (26) "Electronic signature" is defined by KRS 369.102(8).
- 2 (27) "Employee" means an individual who is employed by an SCL provider.
- 3 (28) "Executive director" means an individual who shall:
- 4 (a) Design, develop, and implement strategic plans for an SCL provider;
- 5 (b) Maintain responsibility for the day-to-day operation of the SCL provider organiza-
- 6 tion;
- 7 (c)1. Have a bachelor's or higher degree from an accredited institution; or
- 2. Be a registered nurse;
- 9 (d) Have at least two (2) years of administrative responsibility:
- 1. In an organization which served individuals with an intellectual or developmental
- 11 disability; and
- 2. That includes experience in the execution of the overall administration of an agen-
- 13 cy including:
- a. Development, implementation, and accountability of the agency's budget;
- b. Development, review, and implementation of the agency's policies and proce-
- 16 dures; and
- 17 c. Supervision of employees including conducting performance evaluations;
- (e) Meet all personnel and training requirements specified in Section 3 of this admin-
- 19 istrative regulation; and
- 20 (f) If providing professional oversight or supervision of employees, meet the supervi-
- 21 sory qualifications specified for each service.
- 22 (29) "Exploitation" is defined by KRS 209.020(9).
- 23 (30) "Extended family member" means a relative of an individual by blood or mar-

- riage beyond the individuals included in the definition of immediate family member.
- 2 (31) "Family home provider" means a home:
- 3 (a) Not owned or leased by an SCL provider;
- 4 (b) In which a participant receives SCL services and resides in the family occupied
- 5 (leased or owned) home; and
- 6 (c) In which the family:
- 7 1. Includes the participant in the family's household routines;
- 8 2. Provides training and supervision; and
- 9 3. Ensures that the participant's needs are met in accordance with the:
- a. Participant's plan of care; and
- b. Supports for Community Living Policy Manual.
- 12 (32) "Financial management agency" means an agency contracted by the depart-
- ment that manages individual participant-directed service budgets.
- 14 (33) "Functional Assessment" means an assessment performed using evidenced
- based tools, direct observation, and empirical measurement to obtain and identify func-
- tional relations between behavioral and environmental factors.
- 17 (34) "Good cause" means a circumstance beyond the control of an individual that af-
- fects the individual's ability to access funding or services, which includes:
- (a) Illness or hospitalization of the individual which is expected to last sixty (60) days
- 20 or less;
- 21 (b) Required paperwork and documentation for processing in accordance with Sec-
- 22 tion 2 of this administrative regulation has not been completed but is expected to be
- completed in two (2) weeks or less; or

- 1 (c) The individual or his or her guardian has made diligent contact with a potential
- 2 provider to secure placement or access services but has not been accepted within the
- 3 sixty (60) day time period.
- 4 (35) "Group home" means a residential setting:
- 5 (a) That is licensed in accordance with 902 KAR 20:078;
- 6 (b) That is managed by a provider who meets the SCL provider requirements estab-
- 7 lished in Section 3 of this administrative regulation; and
- 8 (c) In which no more than eight (8) participants reside.
- 9 (36) "Guardian" is defined by KRS 387.010(3) for a minor and in KRS 387.812(3) for
- 10 an adult.
- 11 (37) "Homicidal ideation" means thoughts about homicide which may range from
- vague ideas to detailed or fully formulated plans without taking action.
- 13 (38) "Human rights committee" means a group of individuals:
- (a) Comprised of representatives from home and community based waiver provider
- agencies in the community where a participant resides; and
- 16 (b) Who meet:
- 1. To ensure that the rights of participants are respected and protected through due
- 18 process; and
- 2. In accordance with the Human Rights Committee requirements established in the
- 20 Supports for Community Living Policy Manual.
- 21 (39) "Human services field" means psychology, behavioral analysis, counseling, re-
- 22 habilitation counseling, public health, special education, sociology, gerontology, recrea-
- tional therapy, education, occupational therapy, physical therapy, speech therapy, social

- 1 work, or family studies.
- 2 (40) "ICF- IID" means an intermediate care facility for an individual with an intellectual
- 3 disability.
- 4 (41) "Illicit substance" means:
- 5 (a) A drug, prescription or not prescription, used illegally or in excess of therapeutic
- 6 levels;
- 7 (b) A prohibited drug; or
- 8 (c) A prohibited substance.
- 9 (42) "Immediate family member" is defined by KRS 205.8451(3).
- 10 (43) "Impact service" means a service designed to decrease the amount of paid sup-
- ports a participant requires as the participant becomes:
- 12 (a) More independent; and
- 13 (b) Less reliant on an employee.
- 14 (44) "Individual family service plan" or "IFSP" is defined by KRS 200.654(9).
- 15 (45) "Integrated employment site" means the location of an activity or job that pro-
- vides regular interaction with people without disabilities, excluding service providers, to
- the same extent that a worker without disabilities in a comparable position interacts with
- 18 others.
- 19 (46) "Integrated setting" means a setting that:
- 20 (a) Enables a participant to interact with nondisabled persons to the fullest extent
- 21 possible;
- 22 (b) Includes access to community activities and opportunities at times, frequencies,
- 23 and with persons of a participant's choosing; and

- (c) Affords a participant choice in the participant's daily life activities.
- 2 (47) "Intellectual disability" or "ID" means:
- 3 (a) A demonstration:
- 4 1. Of significantly sub-average intellectual functioning and an intelligence quotient
- 5 (IQ) of approximately seventy (70) or below; and
- 2. Of concurrent deficits or impairments in present adaptive functioning in at least two
- 7 (2) of the following areas:
- 8 a. Communication;
- b. Self-care;
- 10 c. Home living;
- d. Social or interpersonal skills;
- e. Use of community resources;
- f. Self-direction;
- g. Functional academic skills;
- 15 h. Work;
- i. Leisure; or
- j. Health and safety; and
- (b) An intellectual disability that had an onset before eighteen (18) years of age.
- (48) "Legally responsible individual" means an individual who has a duty under state
- 20 law to care for another person and includes:
- (a) A Parent (biological, adoptive, or foster) of a minor child who provides care to the
- 22 child;
- (b) The guardian of a minor child who provides care to the child; or

- 1 (c) A spouse of a participant.
- 2 (49) "Level of care determination" means a determination by the department that an
- 3 individual meets patient status criteria for an intermediate care facility for an individual
- 4 with an intellectual disability as established in 907 KAR 1:022.
- 5 (50) "Licensed clinical social worker" means an individual who is currently licensed in
- 6 accordance with KRS 335.100.
- 7 (51) "Licensed dietitian" is defined by KRS 310.005(11).
- 8 (52) "Licensed marriage and family therapist" or "LMFT" is defined by KRS
- 9 335.300(2).
- 10 (53) "Licensed professional clinical counselor" or "LPCC" is defined by KRS
- 11 335.500(3).
- 12 (54) "Licensed psychological associate" means an individual who is currently li-
- censed in accordance with KRS 319.064.
- 14 (55) "Licensed psychological practitioner" means an individual who is currently li-
- censed in accordance with KRS 319.053.
- 16 (56) "Licensed psychologist" means an individual who is currently licensed in accord-
- 17 ance with KRS 319.050.
- 18 (57) "Life history" means an account of the series of events making up a participant's
- 19 life including:
- 20 (a) Developmental and historical information regarding family of origin, childhood ex-
- 21 periences, and life events to present;
- 22 (b) History of supports received across the life span; and
- (c) Life style practices which may lead to greater insight regarding a participant's cur-

- rent preferences, behavioral patterns, wants, and needs.
- 2 (58) "Medically necessary" or "medical necessity" means that a covered benefit is de-
- 3 termined to be needed in accordance with 907 KAR 3:130.
- 4 (59) "National Core Indicators" means:
- 5 (a) A collaboration between the National Association of State Directors of Develop-
- 6 mental Disability Services and the Human Services Research Institute;
- 7 (b) An effort by public developmental disabilities agencies to measure and track their
- 8 own performance; and
- 9 (c) Standard measures:
- 1. Used across states to assess the outcomes of services provided to individuals and
- 11 families; and
- 2. Which address key areas of concern including employment, rights, service plan-
- 13 ning, community inclusion, choice, and health and safety.
- 14 (60) "Natural supports" means assistance, relationships, or interactions that:
- (a) Allow a participant to be in the community;
- (b) Include working in a job of the participant's choice in ways similar to people with-
- 17 out disabilities; and
- (c) Are based on ordinary social relationships at work and in the community.
- 19 (61) "Neglect" is defined by KRS 209.020(16).
- 20 (62) "Occupational therapist" is defined by KRS 319A.010(3).
- 21 (63) "Occupational therapy assistant" is defined by KRS 319A.010(4).
- 22 (64) "Office of Vocational Rehabilitation" means the agency mandated:
- (a) By the Rehabilitation Act of 1973, as amended; and

- 1 (b) To provide individualized services to eligible individuals with disabilities with a
- 2 substantial impediment to employment in order for the individual to gain and maintain
- 3 employment.
- 4 (65) "Participant" means a Medicaid recipient who:
- 5 (a) Meets patient status criteria for an intermediate care facility for an individual with
- an intellectual or developmental disability as established in 907 KAR 1:022;
- 7 (b) Is authorized by the department to receive SCL waiver services; and
- 8 (c) Utilizes SCL waiver services and supports in accordance with a person centered
- 9 plan of care.
- 10 (66) "Participant directed service" means an option to receive a service which is
- based on the principles of self-determination and person centered thinking.
- 12 (67) "Person centered coach" means a person who:
- (a) Assists a participant and the participant's person centered team in implementing
- and monitoring the effectiveness of the participant's person centered plan of care;
- (b) Models person centered thinking;
- (c) Is responsible for training a participant, family, guardian, natural and unpaid sup-
- 17 ports, and other members of the person centered team when barriers challenge the
- success of the participant in achieving his or her goals;
- 19 (d) Has:
- 1. A high school diploma or GED; and
- 2.a. Two (2) years of experience in the field of intellectual or developmental disabili-
- 22 ties; or
- b. Completed twelve (12) hours of college coursework in a human services field;

- (e) Meets all personnel and training requirements established in Section 3 of this ad-
- 2 ministrative regulation; and
- 3 (f) Performs required documentation.
- 4 (68) "Person centered employment plan" means a document that identifies the
- 5 unique preferences, strengths, and needs of a participant in relation to the participant's
- 6 work.
- 7 (69) "Person centered plan of care" or "POC" means:
- 8 (a) The eight (8) page form incorporated by reference titled "Person Centered Plan of
- 9 Care"; and
- 10 (b) A written individualized plan that is developed:
- 11 1. By:
- a. An SCL participant or an SCL participant's guardian;
- b. The case manager; and
- 14 c. Any other person designated by the SCL participant if the SCL participant designated by the SCL participant are selected as a selected participant of the SCL participant of the
- nates any other person; and
- 16 2. Using a process that:
- a. Allows the participant, or the participant's guardian, to direct the planning and allo-
- cation of resources to meet the participant's life goals;
- b. Achieves understanding of how the participant:
- 20 (i) Learns;
- 21 (ii) Makes decisions; and
- 22 (iii) Chooses to live and work in the community;
- c. Discovers the participant's likes and dislikes; and

- d. Empowers the participant or the participant's guardian to create a life plan and cor-
- 2 responding plan of care for the participant that:
- 3 (i) Is based on the participant's preferences, ideas, and needs;
- 4 (ii) Encourages and supports the participant's long term satisfaction;
- 5 (iii) Is supported by a short-term plan that is based on reasonable costs, given the
- 6 participant's support needs;
- 7 (iv) Includes participant input;
- 8 (v) Includes a range of supports, including funded, community, and natural supports;
- 9 (vi) Includes information necessary to support a participant during times of crisis, to
- include crisis prevention strategies, crisis intervention strategies, and positive behavioral
- supports, if deemed necessary by the participant and the participant's support team;
- 12 and
- 13 (vii) Assists the participant in making informed choices by facilitating knowledge of
- and access to services and supports.
- 15 (70) "Person centered team" means a participant's guardian or representative and
- other individuals who are natural or paid supports and who:
- 17 (a) Recognize that evidenced based decisions are determined within the basic
- framework of what is important for the participant and within the context of what is im-
- 19 portant to the participant based on informed choice;
- 20 (b) Work together to identify what roles they will assume to assist the participant in
- 21 becoming as independent as possible in meeting the participant's needs; and
- (c) Include providers who receive payment for services who shall:
- 1. Be active contributing members of the person centered team meetings;

- 2. Base their input upon evidence-based information; and
- 2 3. Not request reimbursement for person centered team meetings.
- 3 (71) "Physical therapist" is defined by KRS 327.010(2).
- 4 (72) "Physical therapist assistant" means a skilled health care worker who:
- 5 (a) Is certified by the Kentucky Board of Physical Therapy; and
- 6 (b) Performs physical therapy and related duties as assigned by the supervising
- 7 physical therapist.
- 8 (73) "Positive behavior support specialist" means an individual who;
- 9 (a) Provides evidence-based individualized interventions that assist a participant with
- acquisition or maintenance of skills for community living and behavioral intervention for
- 11 the reduction of maladaptive behaviors;
- (b) Has a master's degree in a behavioral science and one (1) year of experience in
- 13 behavioral programming;
- (c) Has at least one (1) year of direct service experience with individuals with intellec-
- tual or developmental disabilities;
- (d) Meets all personnel and training requirements established in Section 3 of this ad-
- 17 ministrative regulation; and
- (e) Participates in at least six (6) hours per year of professional development or con-
- tinuing education in the areas of psychology, behavioral supports, applied behavioral
- 20 science, or school psychology.
- 21 (74) "Prohibited drugs" means all drugs and substances which are illegal under KRS
- 22 Chapter 218A or other statutes or administrative regulations of the Commonwealth of
- 23 Kentucky.

- 1 (75) "Registered agent" means an individual meeting the requirements of KRS 14A.4-
- 2 010(1)(b).
- 3 (76) "Registered nurse" is defined by KRS 314.011(5).
- 4 (77) "Registered office" means an office meeting the requirements of KRS 14A.4-
- 5 010(1)(a).
- 6 (78) "Representative" is defined in KRS 205.5605(6).
- 7 (79) "Room" means the aggregate expense of housing costs for the purpose of
- 8 providing shared living, including:
- 9 (a) Rent, lease, or mortgage payments;
- 10 (b) Real estate taxes;
- 11 (c) Insurance;
- 12 (d) Maintenance; and
- 13 (e) Utilities.
- 14 (80) "SCL intellectual disability professional" or "SCL IDP" means an individual who:
- (a) Has at least one (1) year of experience working with persons with intellectual or
- 16 developmental disabilities;
- (b) Meets all personnel and training requirements established in Section 3 of this ad-
- 18 ministrative regulation; and
- 19 (c)1. Is a doctor of medicine or osteopathy;
- 2. Is a registered nurse; or
- 3. Holds at least a bachelor's degree from an accredited institution in a human ser-
- 22 vices field.
- 23 (81) "SCL provider" means an entity that meets the criteria established in Section 3 of

- 1 this administrative regulation.
- 2 (82) "Serious medication error" means a medication error that requires or has the po-
- 3 tential to require a medical intervention or treatment.
- 4 (83) "Shared living caregiver" means an unrelated individual who:
- 5 (a) Resides with a participant in the participant's home;
- 6 (b) Provides supervision and necessary personal assistance services as specified in
- 7 the participant's person centered plan of care;
- 8 (c)1. Is at least eighteen (18) years of age and has a high school diploma or GED; or
- 9 2. Is at least twenty-one (21) years old;
- (d) Meets all personnel and training requirements established in Section 3 of this ad-
- 11 ministrative regulation;
- (e) Has the ability to:
- 1. Communicate effectively with a participant and the participant's family;
- 2. Read, understand and implement written and verbal instructions; and
- 3. Perform required documentation;
- (f) Has been determined by the participant's person centered team, prior to being
- alone with the participant, to meet the following qualifications:
- 1. Demonstrate competence and knowledge on topics required to safely support the
- participant as described in the participant's person centered plan of care; and
- 20 2. Have the ability to participate as a member of the participant's person centered
- 21 team if requested by the participant; and
- 22 (g) Does not have any of the following relationships to the participant:
- 1. Immediate family member;

- 2. Extended family member;
- 2 3. Guardian; or
- 4. Legally responsible individual.
- 4 (84) "Speech-language pathologist" is defined by KRS 334A.020(3).
- 5 (85) "Staffed residence" means a residential setting:
- 6 (a) That is owned or leased by a provider who meets the SCL provider requirements
- 7 established in Section 3 of this administrative regulation; and
- 8 (b) In which no more than three (3) participants reside.
- 9 (86) "Subcontractor" means an entity or an individual:
- (a) Who is a currently credentialed professional or other service provider;
- (b) Who has signed an agreement with a certified SCL agency to provide SCL ser-
- 12 vices and supports; and
- (c) To whom the employee requirements in this administrative regulation apply.
- 14 (87) "Suicidal ideation" means thoughts about suicide which may range from being
- 15 fleeting in nature to detailed planning.
- 16 (88) "Supported Employment Long-Term Support Plan" means a document that iden-
- tifies the amount and kind of support necessary for a participant to maintain employ-
- ment and achieve individualized employment goals.
- 19 (89) "Supported employment specialist" means an individual who:
- 20 (a) Provides ongoing support services to eligible participants in supported employ-
- 21 ment jobs in accordance with Section 4 of this administrative regulation;
- (b)1. Has at least a bachelor's degree from an accredited college or university and
- one (1) year of experience in the field of developmental disabilities; or

- 2. Has relevant experience or credentialing that substitutes for the educational re-
- 2 quirement stated in subparagraph 1. of this paragraph on a year-for-year basis;
- 3 (c) Meets the personnel and training requirements established in Section 3 of this
- 4 administrative regulation; and
- 5 (d) Completes the Kentucky Supported Employment Training Project curriculum from
- the Human Development Institute at the University of Kentucky within six (6) months of
- 7 the date the specialist begins providing SCL supported employment services.
- 8 (90) "Supports for Community Living" or "SCL" means home and community-based
- 9 waiver services for an individual with an intellectual or developmental disability.
- 10 (91) "Supports Intensity Scale" or "SIS" means an assessment tool developed by the
- American Association on Intellectual and Developmental Disabilities (AAIDD) that:
- (a) Measures practical support requirements of individuals with intellectual or devel-
- opmental disabilities in daily living, medical, and behavioral areas; and
- (b) Is administered by a trained professional in the human services field as approved
- by the department.
- Section 2. SCL Participant Eligibility, Enrollment and Termination. (1) To be eligible to
- 17 receive a service in the SCL program, an individual shall:
- (a) Receive notification of potential SCL funding in accordance with Section 7 of this
- 19 administrative regulation;
- 20 (b) Meet ICF-IID patient status requirements established in 907 KAR 1:022;
- (c) Meet Medicaid eligibility requirements established in 907 KAR 1:605;
- 22 (d) Upon receiving notification of potential SCL funding, submit an application packet
- to the department which is included in the Supports for Community Living Policy Manual

- 1 and which shall contain:
- 1. A completed Long Term Care Facilities and Home and Community Based Program
- 3 Certification Form, MAP-350;
- 4 2. The results of a physical examination that was conducted within the last twelve
- 5 (12) months;
- 6 3. A life history which is less than one (1) year old; and
- 7 4. A MAP-24C documenting a participant's status change.
- 8 (2)(a) To maintain eligibility as a participant:
- 9 1. A participant shall be administered a Supports Intensity Scale assessment by the
- department at least once every twenty-four (24) months;
- 2. A participant shall maintain Medicaid eligibility requirements established in 907
- 12 KAR 1:605; and
- 3. An ICF-IID level of care determination shall be performed by the department at
- least once every twelve (12) months.
- (b) The department shall:
- 1. Obtain the rights to use a Supports Intensity Scale; and
- 17 2. Use it in accordance with the terms and conditions required by the copyright asso-
- 18 ciated with it.
- 19 (3) An SCL waiver service shall not be provided to an individual who is:
- 20 (a) Receiving a service in another 1915(c) home and community based waiver pro-
- 21 gram;
- (b) Receiving a duplicative service provided through another funding source; or
- 23 (c) An inpatient of an ICF-IID or other facility.

- 1 (4) Involuntary termination and loss of an SCL waiver program placement shall be:
- 2 (a) In accordance with 907 KAR 1:563; and
- 3 (b) Initiated if:
- 4 1. An applicant fails to access an SCL waiver service within sixty (60) days of receiv-
- 5 ing notice of potential funding without receiving an extension based on demonstration of
- 6 good cause; or
- 7 2. A participant:
- a. Fails to access any services outlined in the participant's POC for a period greater
- 9 than sixty (60) consecutive days without receiving and extension based on demonstra-
- tion of good cause;
- b. Moves to a residence outside of the Commonwealth of Kentucky;
- 12 c. Does not meet ICF-IID patient status criteria in accordance with 907 KAR 1:022.
- 13 (5)(a) An involuntary termination of a service to a participant by an SCL provider shall
- 14 require:
- 1. The SCL provider to:
- a. Simultaneously notify in writing the participant or participant's guardian, the partici-
- pant's case manager, the department, and DBHDID at least thirty (30) days prior to the
- effective date of the termination;
- b. Submit a MAP-24C to the department and DBHDID at the time of termination; and
- 20 2. The participant's case manager, in conjunction with the SCL provider, to:
- a. Provide the participant or participant's guardian with the name, address, and tele-
- 22 phone number of each current SCL provider in Kentucky;
- b. Provide assistance to the participant or participant's guardian in making contact

- with another SCL provider;
- c. Arrange transportation for a requested visit to an SCL provider site;
- d. Provide a copy of pertinent information to the participant or participant's guardian;
- e. Ensure the health, safety, and welfare of the participant until an appropriate
- 5 placement is secured;
- f. Continue to provide supports until alternative services or another placement is se-
- 7 cured; and
- g. Provide assistance to ensure a safe and effective service transition.
- 9 (b) The notice referenced in paragraph (a)1.a. of this subsection shall include:
- 1. A statement of the intended action;
- 11 2. The basis for the intended action;
- 3. The authority by which the intended action is taken; and
- 4. The participant's right to appeal the intended action through the provider's appeal
- 14 or grievance process.
- (6)(a) DBHDID shall initiate an intent to discontinue a participant's participation in the
- SCL waiver program if the participant or participant's guardian submits a written notice
- of intent to discontinue services to:
- 1. The SCL provider; and
- 19 2. DBHDID.
- 20 (b) An action to terminate waiver participation shall not be initiated until thirty (30)
- calendar days from the date of the notice referenced in paragraph (a) of this subsection.
- (c) A participant or guardian may reconsider and revoke the notice referenced in par-
- agraph (a) of this subsection in writing during the thirty (30) calendar day period.

- Section 3. Provider Participation. (1) An SCL provider shall comply with:
- 2 (a) 907 KAR 1:671;
- 3 (b) 907 KAR 1:672;
- 4 (c) 907 KAR 1:673;
- 5 (d) 902 KAR 20:078;
- 6 (e) The Supports for Community Living Policy Manual;
- 7 (f) The Health Insurance Portability and Accountability Act, 42 U.S.C. 1320d-2, and
- 8 45 C.F.R. Parts 160, 162, and 164; and
- 9 (g) 42 U.S.C. 1320d to 1320d-8.
- 10 (2) In order to provide an SCL waiver service in accordance with Section 4 of this
- administrative regulation, an SCL provider shall:
- (a) Be certified by the department prior to the initiation of a service;
- (b) Be recertified at least biennially by the department;
- (c) In accordance with KRS 273.182, maintain a registered agent and a registered of-
- fice in Kentucky with the Office of the Secretary of State and file appropriate statement
- of change documentation with the filing fee with the Office of Secretary of State if the
- 17 registered office or agent changes;
- (d) Be in good standing with the Office of the Secretary of State of the Common-
- wealth of Kentucky pursuant to 30 KAR 1:010 and 30 KAR 1:020;
- 20 (e) Abide by the laws which govern the chosen business or tax structure of the SCL
- 21 provider;
- 22 (f) Maintain policy that complies with this administrative regulation concerning the op-
- eration of the SCL provider and the health, safety, and welfare of all people supported

- or served by the SCL provider;
- 2 (g) Maintain an executive director who shall have the authority and responsibility for
- 3 the management of the affairs of the SCL provider in accordance with written policy and
- 4 procedures that comply with this administrative regulation; and
- 5 (h) Participate in the National Core Indicators' surveys and all department survey ini-
- 6 tiatives.
- 7 (3) An SCL provider shall:
- 8 (a) Ensure that SCL waiver services shall not be provided to a participant by a staff
- 9 person of the SCL provider who is a guardian, legally responsible individual, or immedi-
- ate family member of the participant unless allowed for a participant directed service in
- accordance with Section 4 of this administrative regulation;
- (b) Not enroll a participant whose needs the SCL provider is unable to meet;
- (c) Have and follow written criteria that comply with this administrative regulation for
- determining the eligibility of a participant for admission to services;
- 15 (e) Document:
- 1. A denial for a service; and
- 17 2. The reason for the denial;
- 18 (f) Maintain documentation of its operations including:
- 1. A written description of available SCL waiver services;
- 20 2. A current table of organization;
- 3. A memorandum of understanding with all providers with whom the SCL provider
- 22 shares person centered plans of care;
- 4. Information regarding participants' satisfaction with services and the utilization of

- 1 that information;
- 5. A quality improvement plan that includes updated findings and corrective actions
- as a result of department and case management quality assurance monitoring;
- 4 6. Evidence of continuous improvement of utilizing best practice standards toward
- 5 meeting SCL program goals and the critical strategic areas identified in the annual re-
- 6 port released by the Kentucky National Core Indicators available at the Kentucky Na-
- 7 tional Core Indicators Web site of http://www.nationalcoreindicators.org/states/KY/;
- 7. A written plan of how the SCL provider shall participate in the:
- a. Human Rights Committee in the area in which the SCL provider is located; and
- b. Behavior Intervention Committee in the area in which the SCL provider is located;
- 11 (g) Maintain accurate fiscal information including documentation of revenues and ex-
- 12 penses;
- (h) Maintain a written policy that room and board charges shall be determined as the
- 14 lesser of:
- 1. Seventy (70) percent of the federal benefits rate as determined by the United
- 16 States Social Security Administration; or
- 2. An amortized amount determined by the SCL provider based on the participants
- being served by the SCL provider sharing the following on an equal basis:
- a. Lease, mortgage payment, or market rent;
- b. Utilities and basic television services;
- c. The costs of food and household goods based upon the number of people, includ-
- ing participants and staff, in the home during waking hours; and
- d. The costs of residential telephone services on the basis of the SCL provider paying

- 1 fifty (50) percent of the costs (excluding long distance telephone costs) and the partici-
- 2 pants sharing the burden of the remaining costs;
- 3 (i) Meet the following requirements if responsible for the management of a partici-
- 4 pant's funds:
- 1. Separate accounting shall be maintained for each participant or for the partici-
- 6 pant's interest in a common trust or special account;
- 7 2. Account balance and records of transactions shall be provided to the participant or
- 8 the participant's guardian on a quarterly basis; and
- 9 3. The participant or the participant's guardian shall be notified if a balance is ac-
- 10 crued that may affect Medicaid eligibility;
- (j) Have a written statement of its mission and values which shall:
- 1. Support participant empowerment and informed decision-making;
- 2. Support and assist participants to form and remain connected to natural support
- 14 networks;
- 15 3. Promote participant dignity and self-worth;
- 4. Support team meetings which help ensure and promote the participant's right to
- 17 choice, inclusion, employment, growth, and privacy;
- 5. Foster a restraint-free environment where the use of mechanical restraints, seclu-
- sion, manual restraints including any manner of prone or supine restraint, or chemical
- 20 restraints shall be prohibited; and
- 21 6. Support the SCL program goal that all participants:
- a. Receive person centered waiver services;
- b. Are safe, healthy, and respected in the participant's community;

- c. Live in the community with effective, individualized assistance, and
- d. Enjoy living and working in the participant's community;
- 3 (k) Have written policy and procedures for communication and interaction with a par-
- 4 ticipant, family, or participant's guardian which shall include:
- 5 1. A timely response to an inquiry;
- 2. The opportunity for interaction by direct support professionals;
- 7 3. Prompt notification of any unusual occurrence;
- 4. Visitation with the participant at a reasonable time, without prior notice, and with
- 9 due regard for the participant's right of privacy;
- 5. Involvement in decision making regarding the selection and direction of the per-
- 11 son-centered service provided; and
- 6. Consideration of the cultural, educational, language, and socioeconomic charac-
- teristics of the participant and family being supported;
- (I) Ensure the rights of a participant by:
- 1. Providing conflict free services and supports that are person centered;
- 2. Making available a description of the rights and means by which the rights can be
- exercised and supported including the right to:
- a. Live and work in an integrated setting;
- b. Time, space, and opportunity for personal privacy;
- c. Communicate, associate, and meet privately with the person of choice;
- d. Send and receive unopened mail;
- e. Retain and use personal possessions including clothing and personal articles; and
- f. Private, accessible use of a telephone;

- 3. Having a grievance and appeals system that includes an external mechanism for
- 2 review of complaints; and
- 4. Ensuring access to participation in an area human rights committee in accordance
- 4 with the human rights committee policies established in the Supports for Community
- 5 Living Policy Manual;
- 6 (m) Maintain fiscal records, service records, investigations, medication error logs, and
- 7 incident reports for a minimum of six (6) years from the date that:
- 8 1. A covered service is provided; or
- 2. The participant turns twenty-one (21) years of age, if the participant is under the
- age of twenty-one (21);
- (n) Make available all records, internal investigations, and incident reports:
- 12 1. To the:
- a. Department;
- b. DBHDID;
- c. Office of Inspector General or its designee;
- d. General Accounting Office or its designee;
- e. Office of the Auditor of Public Accounts or its designee;
- f. Office of the Attorney General or its designee;
- 19 g. DCBS; or
- 20 h. Centers for Medicare and Medicaid Services; or
- 2. Pertaining to a participant to:
- a. The participant, the participant's guardian, or the participant's case manager upon
- 23 request; or

- b. Protection and Advocacy upon written request;
- 2 (o) Cooperate with monitoring visits from monitoring agents;
- 3 (p) Maintain a record for each participant served that shall:
- 1. Be recorded in a readable print format in ink or typed print;
- 5 2. Be free from correction fluid or correction tape;
- 6 3. Have a strike through each error that is initialed and dated;
- 7 4. Contain no blank lines in between each entry;
- 5. Document late entries;
- 9 6. Contain all information necessary to support person centered practices;
- 10 7. Be cumulative;
- 11 8. Be readily available;
- 9. Contain documentation which meets the requirements of Section 4 of this adminis-
- 13 trative regulation;
- 14 10. Contain the following:
- a. The participant summary sheet;
- b. The participant's name, Social Security number, and Medicaid identification num-
- 17 ber;
- c. The Supports Intensity Scale Assessment Form;
- d. The results of a health risk screening performed using a Health Risk Screening
- 20 Tool which shall:
- 21 (i) Be administered by trained personnel at least annually and updated as needed;
- 22 (ii) Assist in determining a participant's areas of vulnerability for a potential health
- 23 risk; and

- 1 (iii) Be provided in accordance with the health risk screening tool requirements estab-
- 2 lished in the Supports for Community Living Policy Manual;
- e. The current person centered plan of care;
- f. The goals and objectives identified by the participant and the participant's person
- 5 centered team which facilitates achievement of the participant's chosen outcomes as
- 6 identified in the participant's POC;
- 7 g. A list containing emergency contact telephone numbers;
- 8 h. The participant's history of allergies with appropriate allergy alerts;
- i. The participant's medication record, including a copy of the signed or authorized
- current prescription or medical orders and the medication administration record (MAR) if
- medication is administered at the service site;
- j. A recognizable photograph of the participant;
- k. Legally adequate consent, updated annually, and a copy of which is located at
- each service site for the provision of services or other treatment requiring emergency at-
- 15 tention;
- 16 I. The participant's individual educational plan or individual family service plan, if ap-
- 17 plicable;
- m. The participant's life history updated at least annually;
- n. The results of an annual physical exam;
- o. The results of an annual dental exam;
- p. The Long Term Care Facilities and Home and Community Based Program Certifi-
- 22 cation Form, MAP-350 updated annually;
- q. A psychological evaluation;

- 1 r. A current level of care certification;
- s. The prior authorization notifications; and
- 3 t. Incident reports, if any exist;
- 4 11. Be maintained by the provider in a manner that:
- a. Ensures the confidentiality of the participant's record and other personal infor-
- 6 mation; and
- b. Allows the participant or guardian to determine when to share the information in
- 8 accordance with law;
- 9 12. Be safe from loss, destruction, or use by an unauthorized person ensured by the
- 10 provider; and
- 13. Have a corresponding legend which the provider shall make readily accessible;
- (q) Ensure that an employee or volunteer:
- 1. Behaves in a legal and ethical manner in providing a service;
- 2. Has a valid Social Security number or valid work permit if not a citizen of the Unit-
- ed States of America; and
- 3. If responsible for driving a participant during a service delivery, has a valid driver's
- 17 license with proof of current mandatory liability insurance for the vehicle used to
- transport the participant;
- 19 (r) Ensure that an employee or volunteer:
- 1. Completes a tuberculosis (TB) risk assessment performed by a licensed medical
- 21 professional and, if indicated, a TB skin test with a negative result within the past twelve
- 22 (12) months as documented on test results received by the provider within thirty (30)
- 23 days of the date of hire or date the individual began serving as a volunteer; or

- 2. Who tests positive for TB or has a history of positive TB skin tests:
- a. Shall be assessed annually by a licensed medical professional for signs or symp-
- 3 toms of active disease; and
- b. If it is determined that signs or symptoms of active disease are present, in order for
- 5 the person to be allowed to work or volunteer, he or she shall be administered follow-up
- testing by his or her physician with the testing indicating the person does not have ac-
- 7 tive TB disease:
- 8 (s) Maintain documentation:
- 9 1. Of an annual TB risk assessment or negative TB test for each employee who per-
- forms direct support or a supervisory function; or
- 2. Annually for each employee with a positive TB test that ensures no active disease
- 12 symptoms are present;
- (t) Provide a written job description for each staff person that describes the required
- qualifications, duties, and responsibilities for the person's job;
- (u) Maintain an employee record for each employee that includes:
- 1. The employee's experience;
- 17 2. The employee's training;
- 3. Documented competency of the employee;
- 4. Evidence of the employee's current licensure or registration if required by law; and
- 5. An annual evaluation of the employee's performance;
- 21 (v) Require a background check:
- 1. And drug testing for each employee who is paid with funds administered by the
- 23 department and who:

- a. Provides support to a participant who utilizes SCL services; or
- b. Manages funds or services on behalf of a participant who utilizes SCL services; or
- 2. For a volunteer recruited and placed by an agency or provider who has the poten-
- 4 tial to interact with a participant;
- 5 (w) Ensure that a volunteer placed by an agency or provider does not have unsuper-
- 6 vised interaction with a participant;
- 7 (x) For a potential employee or volunteer obtain:
- 1. The results of a criminal record check from the Kentucky Administrative Office of
- 9 the Courts or equivalent out-of-state agency if the individual resided or worked outside
- of Kentucky during the year prior to employment or volunteerism;
- 2. The results of a nurse aide abuse registry check as described in 906 KAR 1:100 or
- an equivalent out-of-state agency if the individual resided or worked outside of Kentucky
- during the year prior to employment or volunteerism; and
- 3. Within thirty (30) days of the date of hire or initial date of volunteerism, the results
- of a central registry check as described in 922 KAR 1:470 or an equivalent out-of-state
- agency if the individual resided or worked outside of Kentucky during the year prior to
- 17 employment or volunteerism;
- (y) For each potential employee obtain negative results of drug testing for illicit or
- 19 prohibited drugs;
- 20 (z) On an annual basis:
- 1. Randomly select and perform criminal history background checks, nurse aide
- 22 abuse registry checks, and central registry checks of at least twenty-five (25) percent of
- 23 employees; and

- 2. Conduct drug testing of at least five (5) percent of employees;
- 2 (aa) Not employ, subcontract with, or place an individual as a volunteer who:
- 1. Has a prior conviction of an offense delineated in KRS 17.165(1) through (3);
- 4 2. Has a prior felony conviction, plea bargain, amended plea bargain, or diversion
- 5 program that has not been completed;
- 6 3. Has a drug related conviction within the past five (5) years;
- 7 4. Has a positive drug test for prohibited drugs;
- 8 5. Has a conviction of abuse, neglect, or exploitation;
- 9 6. Has a Cabinet for Health and Family Services finding of child abuse or neglect
- 10 pursuant to the central registry; or
- 7. Is listed on the nurse aide abuse registry;
- (bb) Not permit an employee to transport a participant if the individual has a driving
- under the influence conviction, amended plea bargain, or diversion during the past year;
- (cc) Maintain adequate staffing and supervision to implement services being billed;
- (dd) Establish written guidelines that address and ensure the health, safety, and wel-
- fare of a participant, which shall include:
- 1. A basic infection control plan that includes:
- a. Universal precautions;
- 19 b. Hand washing;
- c. Proper disposal of biohazards and sharp instruments; and
- d. Management of common illness likely to be emergent in the particular service set-
- 22 ting;
- 23 2. Effective cleaning and maintenance procedures sufficient to maintain a sanitary

- and comfortable environment that prevents the development and transmission of infec-
- 2 tion;
- 3. Ensuring that each site operated by the provider is equipped with:
- a. An operational smoke detector placed in all bedrooms and other strategic loca-
- 5 tions; and
- b. At least two (2) correctly charged fire extinguishers placed in strategic locations, at
- 7 least one (1) of which shall be capable of extinguishing a grease fire and have a rating
- 8 of 1A10BC;
- 4. Ensuring the availability of an ample supply of hot and cold running water with the
- water temperature complying with the safety limits established in the participant's POC;
- 5. Establishing written procedures concerning the presence of deadly weapons as
- defined in KRS 500.080 which shall ensure:
- a. Safe storage and use; and
- b. That firearms and ammunition are permitted:
- (i) Only in nonprovider owned or leased residences; and
- (ii) Only if stored separately and under double lock;
- 6. Establishing written procedures concerning the safe storage of common household
- 18 items;
- 7. Ensuring that the nutritional needs of a participant are met in accordance with the
- 20 current recommended dietary allowance of the Food and Nutrition Board of the National
- 21 Research Council or as specified by a physician;
- 8. Ensuring that an adequate and nutritious food supply is maintained as needed by
- 23 the participant;

- 1 9. Ensuring that:
- a. Every case manager and any employee who will be administering medication, un-
- 3 less the employee is a currently licensed or registered nurse, has:
- 4 (i) Specific training provided by a registered nurse per a DBHDID medication admin-
- 5 istration approved curriculum; and
- 6 (ii) Documented competency on medication administration, medication cause and ef-
- 7 fect, and proper administration and storage of medication; and
- b. An individual administering medication documents all medication administered, in-
- 9 cluding self-administered and over-the-counter drugs, on a medication administration
- record, with the date, time, and initials of the person who administered the medication
- and ensure that the medication shall:
- (i) Be kept in a locked container;
- (ii) If a controlled substance, be kept under double lock with a documented medica-
- tion count performed every shift;
- (iii) Be carried in a proper container labeled with medication and dosage pursuant to
- 16 KRS 315.010(8) and 217.182(6);
- (iv) Accompany and be administered to a participant at a program site other than the
- 18 participant's residence if necessary; and
- (v) Be documented on a medication administration record and properly disposed of, if
- 20 discontinued; and
- 21 10. Adhering to policies and procedures for ongoing monitoring of medication admin-
- 22 istration;
- (ee) Establish and follow written guidelines for handling an emergency or a disaster

- 1 which shall:
- 1. Be readily accessible on site;
- 2. Include instruction for notification procedures and the use of alarm and signal sys-
- 4 tems to alert a participant according to the participant's disability;
- 5 3. Include documentation of training of staff and participants on emergency disaster
- 6 drills:
- 4. Include an evacuation drill to be conducted in three (3) minutes or less, document-
- 8 ed at least quarterly and, for a participant who receives residential support services, is
- 9 scheduled to include a time when the participant is asleep; and
- 5. Mandate that the result of an evacuation drill be evaluated and if not successfully
- completed within three (3) minutes shall modify staffing support as necessary and re-
- peat the evacuation drill within seven (7) days;
- (ff) Provide orientation for each new employee which shall include the mission, goals,
- organization, and practices, policies, and procedures of the agency;
- (gg)1. Annually provide or arrange for the provision of at least six (6) hours of profes-
- sional development or continuing education units of competency-based training to each
- employee to teach and enhance skills related to the performance of duties, except for a
- case management supervisor or positive behavior support specialist;
- 2. Annually provide or arrange for the provision of at least six (6) hours of profession-
- al development or continuing education units in the area of person centered processes,
- supervision, or mentoring to each employee who is a case management supervisor; or
- 3. Annually provide or arrange for the provision of at least six (6) hours of profession-
- 23 al development or continuing education units in the area of psychology, behavioral sup-

- 1 ports, applied behavioral science, or school psychology to each employee who is a
- 2 positive behavior support specialist;
- 3 (hh) Require documentation of all face-to-face training which shall include:
- 4 1. The type of training provided:
- 5 2. The name and title of the trainer;
- 6 3. The training objectives;
- 7 4. The length of the training;
- 8 5. The date of completion;
- 9 6. The signature of the trainee verifying completion; and
- 7. Verification of competency of the trainee as demonstrated by post-training as-
- sessments, competency checklists, or post-training observations and evaluations;
- (ii) Require documentation of Web-based training which shall include:
- 13 1. Transcripts verifying successful completion of training objectives with scores of
- eighty-five (85) percent or higher; and
- 2. Competency checklist listing date of completion, signature of evaluator, and signa-
- ture of trainee for all Phase I or Phase II Kentucky College of Direct Support modules
- within the timeframe specified;
- (jj) Ensure that each case manager or employee prior to independent functioning
- 19 successfully completes training which shall include:
- 20 1. First aid, which shall be provided by a certified trainer with a nationally-accredited
- 21 organization to include the American Red Cross and the American Heart Association
- 22 and evidenced by official documentation of completion from the nationally-accredited
- 23 organization;

- 2. Cardiopulmonary resuscitation which shall be provided by a certified trainer with a
- 2 nationally-accredited organization to include the American Red Cross and the American
- 3 Heart Association and evidenced by official documentation of completion from the na-
- 4 tionally-accredited organization;
- 3. Department of Behavioral Health, Developmental and Intellectual Disabilities' Cri-
- 6 sis Prevention and Intervention Training;
- 7 4. Successful completion of all Kentucky College of Direct Support Phase I training
- 8 modules;

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- 5. Individualized instruction about the person centered POC of the participant to
- 10 whom the trainee provides supports; and
- 6. Verification of trainee competency as demonstrated by pre- and post-training as-
- sessments, competency checklists, and post-training observations or evaluations;
- (kk) Ensure that all case managers or employees, unless the case manager or em-
- ployee is a licensed professional providing a service governed by the licensure of the
- individual's profession, complete the Kentucky College of Direct Support Phase II train-
- ing modules, no later than six (6) months from the date of employment or when the indi-
- 17 vidual began providing services;
- (II) Ensure that each case manager complete DBHDID approved case management
- training after three (3) months but within nine (9) months from the date of hire;
- 20 (mm) Ensure that each case manager employed prior to the effective date of this
- 21 administrative regulation completes the DBHDID case management training within one
- 22 (1) year of this administrative regulation's effective date; and
  - (nn) Ensure that each adult family member residing in a level II residential adult foster

- care home or family home provider who may be left alone with the participant will re-
- 2 ceive training regarding the individualized needs of the participant.
- 3 (4) DBHDID shall:
- 4 (a) Obtain the rights to use:
- 1. The Health Risk Screening Tool required to be used by an SCL waiver provider
- 6 pursuant to this administrative regulation; or
- 7 2. The Kentucky College of Direct Support training modules required to be used by
- 8 an SCL waiver provider pursuant to this administrative regulation; and
- 9 (b) Facilitate access to the:
- 1. Health Risk Screening Tool required to be used by an SCL waiver provider pursu-
- ant to this administrative regulation; or
- 2. Kentucky College of Direct Support training modules required to be used by an
- SCL waiver provider pursuant to this administrative regulation.
- 14 (5) An SCL provider, employee, or volunteer shall:
- (a) Not manufacture, distribute, dispense, be under the influence of, purchase, pos-
- sess, use, or attempt to purchase or obtain, sell, or transfer any of the following in the
- workplace or while performing work duties:
- 1. An alcoholic beverage;
- 2. A controlled substance except an SCL provider, employee, or volunteer may use
- or possess a medically necessary and legally prescribed controlled substance;
- 21 3. An illicit drug;
- 4. A prohibited drug or prohibited substance;
- 5. Drug paraphernalia; or

- 6. A substance that resembles a controlled substance, if there is evidence that the
- 2 individual intended to pass off the item as a controlled substance; and
- 3 (b) Not possess a prescription drug for the purpose of selling or distributing it.
- 4 Section 4. Covered Services. (1)(a) An SCL waiver service shall:
- 5 1. Be prior authorized by the department; and
- 2. Be provided to a participant pursuant to the participant's person centered POC by
- 7 an individual who meets the requirements established in Section 3 of this administrative
- 8 regulation.
- 9 (b) Any combination of day training, community access, personal assistance, or sup-
- ported employment shall not exceed sixteen (16) hours per day.
- 11 (2) SCL covered services shall include:
- 12 (a) Case management;
- 13 (b) Community access services;
- 14 (c) Community guide services;
- 15 (d) Community transition services;
- (e) Consultative clinical and therapeutic services;
- 17 (f) Day training;
- (g) Environmental accessibility adaptation services;
- 19 (h) Goods and services;
- 20 (i) Natural supports training;
- 21 (j) Occupational therapy;
- 22 (k) Person centered coaching;
- 23 (I) Personal assistance services;

- 1 (m) Physical therapy;
- 2 (n) Positive behavior supports;
- 3 (o) Residential support services;
- 4 (p) Respite;
- 5 (q) Shared living;
- 6 (r) Specialized medical equipment and supplies;
- 7 (s) Speech therapy;
- 8 (t) Supported employment;
- 9 (u) Transportation services; or
- 10 (v) Vehicle adaptation services.
- 11 (3) Case management shall:
- 12 (a) Not include any other SCL waiver service;
- 13 (b) Be provided by a case manager who:
- 1. Meets the personnel and training requirements established in Section 3 of this ad-
- ministrative regulation; and
- 2. Shall not provide any other SCL waiver service to the participant receiving case
- management from the case manager;
- (c) Be conflict free unless the department grants an exemption to the conflict free re-
- 19 quirement in accordance with subsection (4)(b) of this section;
- 20 (d) Include initiation, coordination, implementation, and monitoring of the assess-
- 21 ment, reassessment, evaluation, intake, and eligibility process;
- (e) Include assisting a participant in the identification, coordination, and arrangement
- of the person centered team and person centered team meetings;

- 1 (f) Include facilitating person centered team meetings that assist a participant to de-
- velop, update, and monitor the POC which shall:
- 1. Reflect the principles and tools of self-determination to assist a participant in creat-
- 4 ing supports and services:
- a. Designed to meet the needs of the participant; and
- b. That promote choice, community experiences, employment, and personal satisfac-
- 7 tion;
- 8 2. Be developed and prior authorized within thirty (30) days of the initiation of a ser-
- 9 vice;
- 3. Include the objectives and interventions, goals, and outcomes that meet the partic-
- ipant's identified needs from all assessments and person centered team members;
- 4. Include documented participation in the development of the POC by the partici-
- pant, participant's guardian, family members, other providers, or other people the partic-
- ipant has identified as important in the participant's life and as members of the person
- 15 centered team; and
- 5. Include information about:
- a. What is important to the participant;
- b. What the person centered plan will help the participant accomplish;
- c. What people like and admire about the participant;
- d. The characteristics of people providing support that are important to and for the
- 21 participant;
- e. What people need to know or do to help the participant stay healthy and safe;
- f. Instructions for those who support the participant;

- g. The barriers that block the participant's progress towards the participant's goals;
- 2 h. What action steps are needed to ensure that a participant's goals are reached;
- i. Who is responsible for each action; and
- 4 j. When the action is anticipated to be completed;
- 5 (g) Include assisting a participant to gain access to and maintain employment, mem-
- 6 bership in community clubs, groups, activities and opportunities at the times, frequen-
- 7 cies, and with the people the participant chooses;
- 8 (h) Include coordination and monitoring of all waiver and non-waiver services which
- 9 shall include:

23

- 1. Monthly face-to-face contacts with the participant to determine if the participant's
- 11 needs are being met which shall include:
- a. Contact at a location where the participant is engaged in services; and
- b. Utilization of a DBHDID-approved monitoring tool to:
- (i) Identify that person centered practices are demonstrated by the service provider;
- (ii) Ensure that the participant's health, safety, and welfare is not at risk;
- (iii) Gather data regarding the participant's satisfaction with the services for use in
- guiding the person centered planning process; and
- 18 (iv) Generate monthly summary notes;
- 2. Responsibility to initiate a person centered team meeting and receive prior authori-
- zation within fourteen (14) days of a contact visit if the results of a monthly contact visit
- indicate that different or additional services or other changes in the participant's POC
- are required to meet the participant's needs;
  - 3. Assistance with participant directed services which shall include:

- a. Assisting the participant in identifying, if necessary, a community guide and a rep-
- 2 resentative who shall work with the participant on the development of a POC, budget,
- 3 and emergency back-up plan;
- b. Assisting the participant in recruiting and managing employees;
- 5 c. Assigning modules within the Kentucky College of Direct Supports for training pur-
- 6 poses and assisting the participant, the community guide, or the representative in moni-
- 7 toring the completion of training within timeframes specified in Section 5 of this adminis-
- 8 trative regulation; and
- d. Monitoring the provision of services and submission of required documentation to
- the financial management agency; and
- 4. Authority to require immediate remediation of identified deficiencies that impact the
- health, safety, and welfare of a participant;
- (i) Include assisting a participant in planning resource use and assuring protection of
- 14 resources to include:
- 1. Clearly outlining the participant's insurance options and availability; and
- 2. Exploring the potential availability of other resources and social service programs
- 17 for which the participant may qualify;
- (j) Include ensuring that notification with the MAP-24C occurs to the local DCBS of-
- fice, the department, and DBHDID if a participant is:
- 20 1. Terminated from the SCL waiver program;
- 2. Admitted to an ICF-IID;
- 3. Admitted to a hospital;
- 4. Admitted to a skilled nursing facility;

- 5. Transferred to another Medicaid 1915(c) home and community based waiver pro-
- 2 gram; or
- 6. Relocated to a different address;
- 4 (k) Include monitoring to ensure that services continue if a participant has been ter-
- 5 minated from any service until an alternate provider, if needed, has been chosen by the
- 6 participant and services have been approved;
- 7 (I) Include providing a participant and the participant's team members twenty-four
- 8 (24) hour telephone access to a case management staff person;
- 9 (m) Include documentation of services by:
- 1. A monthly DBHDID approved person centered monitoring tool; and
- 11 2. A detailed monthly summary note which shall include:
- a. The month and year for the time period the note covers;
- b. An analysis of progress toward the participant's outcome or outcomes;
- c. Identification of barriers to achievement of outcomes;
- d. A projected plan to achieve the next step in achievement of outcomes;
- e. The signature and title of the case manager completing the note; and
- f. The date the note was generated;
- (n) Include person centered team meetings which shall not constitute the required
- monthly face-to-face visit with a participant;
- 20 (o) Include the case manager being responsible for providing information about par-
- 21 ticipant directed services:
- 1. At the time the initial POC is developed; and
- 23 2. At least annually thereafter and upon inquiry from the participant or participant's

- 1 guardian; and
- 2 (p) Include the case manager supervisor performing supervision duties:
- As outlined in the Supports for Community Living Policy Manual; and
- 4 2. In accordance with a DBHDID approved case manager supervisor training.
- 5 (4)(a) If a case management service is approved to be provided despite not being
- 6 conflict free, the case management provider shall document and demonstrate that the
- 7 participant:
- 8 1. Receives the same level of advocacy; and
- 2. Exercises free choice of providers and services.
- (b) An exemption to the conflict free requirement shall be granted if:
- 1. A participant requests the exemption; and
- 2. The participant's case manager provides documentation to DBHDID, in accord-
- ance with the Supports for Community Living Policy Manual, that:
- a. Provides evidence that there is a lack of a qualified case manager within thirty (30)
- miles of the participant's residence; or
- b. There is a relationship between the participant and the participant's case manager.
- (c) A request to receive a case management service that is not conflict free shall ac-
- 18 company each prior authorization request for the case management service.
- (d) One (1) unit of a case management service shall equal one (1) month.
- 20 (e) A provider shall bill for a case management service in accordance with 907 KAR
- 21 12:020.
- 22 (5) A community access service:
- 23 (a) Shall be provided by a community access specialist;

- 1 (b) Shall be designed to support a participant to participate in meaningful routines,
- 2 events, and activities through various community organizations;
- 3 (c) Shall be designed to empower a participant in developing natural supports;
- 4 (d) May be participant directed;
- 5 (e) If participant directed, may be provided by an immediate family member, guardi-
- an, or legally responsible individual of the participant in accordance with Section 5 of
- 7 this administrative regulation;
- 8 (f) Shall stress training that empowers a participant in acquiring, practicing, utilizing,
- 9 and improving skills related to:
- 1. Connecting with others;
- 11 2. Independent functioning;
- 12 3. Self advocacy;
- 4. Socialization;
- 5. Community participation;
- 6. Personal responsibility;
- 7. Financial responsibility; and
- 8. Other skills related to optimal well-being as defined in the participant's POC;
- (g) Shall be designed to result in an increased ability to develop natural supports and
- access community resources including educational, recreational, religious, civic, or vol-
- 20 unteer opportunities with an outcome of:
- 1. Less reliance on formal supports; and
- 22 2. Greater reliance on natural or unpaid supports as established in the participant's
- 23 POC;

- 1 (h) Shall have an emphasis on the development of personal social networks, mem-
- 2 bership opportunities, friendships, and relationships for the participant as established in
- 3 the participant's POC;
- 4 (i) Shall be provided outside the participant's home or residential setting and occur
- 5 during the day, in the evening, or on weekends;
- 6 (j) Shall not duplicate residential, day training services, or authorized therapies;
- 7 (k) Shall be provided to a participant with a:
- 8 1. One (1) to one (1) staff to participant ratio; or
- 9 2. Ratio of one (1) staff to no more than two (2) participants according to the partici-
- pant's POC, if the participant invites a friend;
- 11 (I) Shall occur in an integrated community setting;
- (m) Shall be an impact service and the participant's POC shall define steps to de-
- crease the provision of the service as the participant becomes more independent in ac-
- cessing and becoming part of the community;
- (n) Shall be documented by:
- 1. A note documenting each contact which shall include:
- a. A full description of each service rendered;
- b. Evidence of training or service to support outcomes designated in the participant's
- 19 POC;
- c. The date of the service;
- d. The location of the service;
- e. The beginning and ending times of the service;
- f. The signature and title of the individual providing the service; and

- g. The date the entry was made in the record; and
- 2 2. A monthly summary note which shall include:
- a. The month and year for the time period the note covers;
- b. An analysis of progress toward the participant's outcome or outcomes;
- 5 c. Identification of barriers to achievement of outcomes;
- d. Projected plan to achieve the next step in achievement of outcomes;
- 7 e. The signature and title of the community access specialist completing the note;
- 8 and
- 9 f. The date the note was written; and
- (o) Shall not exceed 160 fifteen (15) minute units per week alone or in combination
- with community access group services.
- 12 (6)(a) A community guide service shall:
- 1. Be provided by a community guide who meets the personnel and training require-
- ments established in Sections 3 and 5 of this administrative regulation;
- 2. Be designed to empower a participant to define and direct the participant's ser-
- 16 vices;
- 3. Only be for a participant who chooses participant directed supports for some or all
- of the participant's support services;
- 19 **4. Include:**
- a. Direct assistance to a participant in meeting his or her participant directed respon-
- 21 sibilities;
- b. Information and assistance that helps the participant in:
- (i) Problem solving;

- 1 (ii) Decision making;
- 2 (iii) Developing supportive community relationships; and
- 3 (iv) Accessing resources that promotes implementation of the participant's POC; and
- 4 c. Information to ensure that the participant understands the responsibilities involved
- 5 with directing the participant's services;
- 5. Be documented by:
- 7 a. A note documenting each contact which shall include:
- 8 (i) A full description of each service rendered;
- 9 (ii) The date of the service;
- 10 (iii) The location of the service;
- 11 (iv) The beginning and ending times of the service;
- (v) The signature and title of the individual providing the service; and
- (vi) The date the entry was made in the record; and
- b. A completed monthly summary note which shall include:
- 15 (i) The month and year for the time period the note covers;
- (ii) An analysis of the efficacy of the service provided including recommendations and
- identification of additional support needs;
- (iii) The signature and title of the community guide completing the note; and
- (iv) The date the note was written; and
- 20 6. Be limited to 576 fifteen (15) minute units per year.
- (b)1. A participant and the participant's person centered team shall determine the
- 22 community guide services to be received.
- 23 2. The community guide services to be received by a participant shall be specified in

- 1 the participant's POC.
- 2 (c) If needed, directed assistance provided by a community guide:
- 1. Shall be based on the needs of the participant; and
- 4 2. May include assistance with:
- a. Recruiting, hiring, training, managing, evaluating, and changing employees;
- b. Scheduling and outlining the duties of employees;
- 7 c. Developing and managing the individual budget;
- 8 d. Understanding provider qualifications; or
- e. Recordkeeping and other program requirements.
- (d) A community guide service shall not duplicate a case management service.
- 11 (e) A community guide providing community guide services to a participant shall not
- 12 provide other direct waiver services to any participant.
- (f) A community guide shall not be employed by an agency that provides other direct
- waiver services to the participant receiving community guide services from the commu-
- 15 nity guide.
- 16 (7) Community transition services:
- (a) Shall be nonrecurring set-up expenses for a participant who is transitioning from
- an institutional or other provider-operated living arrangement to a living arrangement in
- a private residence where the participant is directly responsible for his or her own living
- 20 expenses;
- (b) Shall be expenses that are necessary to enable a participant to establish a basic
- 22 household that do not constitute room and board;
- 23 (c) May include:

- 1. A security deposit that is required to obtain a lease on an apartment or home;
- 2. An essential household furnishings or moving expense required to occupy and use
- a community domicile, including furniture, window coverings, food preparation items, or
- 4 bed or bath linens;
- 5 3. A one (1) time set-up fee or deposit for utility or service access, including tele-
- 6 phone, electricity, heating, or water;
- 7 4. A service necessary for the participant's health and safety including pest eradica-
- 8 tion or one (1) time cleaning prior to occupancy;
- 5. A necessary home accessibility adaptation; or
- 6. An activity to assess a need and arrange for and procure needed resources;
- 11 (d) Shall be:
- 1. Furnished only:
- a. To the extent that the service is reasonable and necessary;
- b. As clearly identified in the participant's POC; and
- 15 c. If the service cannot be obtained from other sources;
- (e) Shall not include:
- 1. Monthly rental or mortgage expense;
- 18 2. Food;
- 3. Regular utility charges;
- 4. Household appliances or items that are intended for purely diversional or recrea-
- 21 tional purposes; or
- 5. Furnishings for living arrangements that are owned or leased by an SCL provider;
- 23 (f) Shall be coordinated and documented by the participant's case manager by:

- 1. Description or itemized line item of purchase and cost;
- 2. A receipt for a procurement including date of purchase;
- 3. The signature and title of the case manager; and
- 4. The date the entry was made in the record; and
- 5 (g) Shall not exceed \$2,000 per qualified transition.
- 6 (8) A consultative clinical and therapeutic service shall:
- 7 (a) Be provided by a person who meets the personnel and training requirements es-
- 8 tablished in Section 3 of this administrative reg; and
- 9 (b) Is a:
- 1. Certified nutritionist;
- 11 2. Licensed dietitian;
- 3. Licensed marriage and family therapist;
- 4. Licensed professional clinical counselor;
- 5. Licensed psychological associate;
- 6. Licensed psychologist;
- 7. Licensed psychological practitioner;
- 17 8. Licensed clinical social worker; or
- 9. Positive behavior support specialist;
- 19 (b) Include:
- 20 1. Professional consultation, evaluation, and assessment of the participant, the envi-
- 21 ronment and the system of support and written summary of findings and recommenda-
- 22 tions for the participant and the participant's person-centered team;
- 23 2. Providing treatment that:

- a. Is consistent with assessment results and diagnosis;
- b. Is evidence based or current best practice; and
- 3 c. Encompasses psychological treatment or counseling as indicated by the condition
- 4 of the participant;
- 5 3. Coordinating program wide support, as needed, that addresses the assessed
- 6 needs, conditions, or symptoms affecting a participant's ability to fully participate in the
- 7 participant's community;
- 4. Participating in developing and revising, as needed, home treatment or support
- 9 plans as components of a participant's POC;
- 5. Providing training and technical assistance to carry out recommendations and
- plans which shall occur within the settings in which the recommendations, home treat-
- ment, or support plans are to be carried out;
- 13 6. Monitoring:
- a. Of the fidelity of data reporting and participant's POC implementation;
- b. Of the effectiveness of the participant's POC;
- 16 c. Of the impact of the participant's POC on the participant, the participant's environ-
- ment and system of supports; and
- d. Which shall be conducted:
- (i) In the settings where the participant's POC is implemented;
- 20 (ii) Through discussions and observations of people implementing the participant's
- 21 POC; and
- 22 (iii) Through reporting data;
- 7. A functional assessment which shall:

- a. Be conducted by a person who meets the personnel and training requirements es-
- 2 tablished in Section 3 of this administrative regulation and is a:
- 3 (i) Licensed psychologist;
- 4 (ii) Certified psychologist with autonomous functioning; or
- 5 (iii) Positive behavior support specialist; and
- b. Include all functional assessment components specified in the Supports for Com-
- 7 munity Living Policy Manual; and
- 8. Documentation of a service by a note documenting each contact which shall in-
- 9 clude:
- a. A full description of each service rendered;
- b. An analysis of the efficacy of the service provided including any recommendation
- or identification of additional support needs if needed;
- c. The date of the service;
- d. The location of the service;
- e. The beginning and end times of the service;
- f. The signature and title of the professional providing the service;
- g. The date the entry was made in the record; and and
- (c) Not exceed 160 fifteen (15) minute units per year.
- 19 (9) Day training:
- 20 (a) Shall be provided by a direct support professional;
- 21 (b) Shall include:
- 1. Providing regularly scheduled activities in a non-residential setting that are de-
- 23 signed to foster the acquisition of skills, build positive social behavior and interpersonal

- 1 competence, foster greater independence and personal choice; and
- 2. Career planning or pre-vocational activities to develop experiential learning oppor-
- tunities and career options consistent with the participant's skills and interests that:
- a. Are person centered and designed to support employment related goals;
- 5 b. Provide active training designed to prepare a participant to transition from school
- 6 to adult responsibilities, community integration, and work;
- 7 c. Enable each individual to attain the highest level of work in the most integrated set-
- ting with the job matched to the participant's interests, strengths, priorities, abilities, and
- 9 capabilities; and
- 10 d. Include:
- (i) Skill development to communicate effectively with supervisors, co-workers, and
- 12 customers;
- (ii) Generally accepted community workplace conduct and dress;
- 14 (iii) Workplace problem solving skills and strategies;
- (iv) General workplace safety;
- (v) The ability to follow directions;
- 17 (vi) The ability to attend tasks; or
- 18 (vii) Mobility training;
- 19 3. Supported retirement activities including:
- a. Altering schedules to allow for more rest time throughout the day; or
- b. Support to participate in hobbies, clubs, or other senior-related activities in the par-
- 22 ticipant's community; or
- 4. Training and supports designed to maintain skills and functioning and to prevent or

- slow regression, rather than acquiring new skills or improving existing skills;
- 2 (c) Shall include required informational sessions sponsored by the provider at least
- 3 annually for the participant regarding community involvement or employment services
- 4 and arrangement of opportunities for the participant to explore community integration,
- 5 supported employment, and other employment opportunities in the community;
- 6 (d) Shall, if provided in an adult day health care center, only be available for a partici-
- 7 pant who:
- 8 1. Is at least twenty-one (21) years of age; and
- 2. Requires skilled nursing services or nursing supervision in a licensed adult day
- health care center as outlined in the participant's POC;
- (e) Shall include environments that:
- 1. Are not diversional in nature;
- 2. Occur in a variety of settings in the community and shall not be limited to fixed-site
- 14 facilities; and
- 3. Coordinate with any needed therapies in the participant's POC;
- (f) May be participant directed and if participant directed, may be provided by an im-
- mediate family member, guardian, or legally responsible individual of the participant in
- accordance with Section 5 of this administrative regulation;
- (g) Shall not be reimbursable if vocational in nature and for the primary purpose of
- 20 producing goods or performing services;
- 21 (h) Shall include documentation that shall be:
- 1. A note for each contact which shall include:
- a. A full description of each service rendered;

- b. The date of the service:
- c. The location of the service;
- d. The beginning and ending times of the service;
- e. The signature and title of the individual providing the service; and
- 5 f. The date the entry was made in the record; and
- 6 2. A completed monthly summary note which shall include:
- 7 a. The month and year for the time period the note covers;
- b. An analysis of the efficacy of the service provided including recommendations and
- 9 identification of additional support needs;
- c. The signature and title of the individual completing the note; and
- d. The date the note was written; and
- (i) Shall be limited to:
- 1. Five (5) days per week excluding weekends; and
- 2. 160 fifteen (15) minute units per week for day training alone or in combination with
- any hours of paid community employment or on-site supported employment service.
- 16 (10)(a) An environmental accessibility adaptation service:
- 17 1. Shall be:
- a. Designed to enable participants to interact more independently with their environ-
- ment thereby enhancing their quality of life and reducing their dependence on physical
- 20 support from others; and
- b. A physical adaptation to a participant's or family's home which shall be necessary
- 22 to:
- 23 (i) Ensure the health, welfare, and safety of the participant; or

- 1 (ii) Enable the participant to function with greater independence in the home and
- 2 without which the participant would require institutionalization;
- 2. May include the following if necessary for the welfare of a participant:
- a. Installation of a ramp or grab-bar;
- 5 b. Widening of a doorway;
- 6 c. Modification of a bathroom facility; or
- d. Installation of a specialized electric and plumbing system which shall be necessary
- 8 to accommodate the medical equipment or supplies necessary for the welfare of the
- 9 participant;
- 10 3. Shall not include:
- a. An adaptation or improvement to a home which is not of direct medical or remedial
- benefit to a participant;
- b. An adaptation that adds to the total square footage of a home except if necessary
- to complete an adaptation; and
- c. An adaptation to a provider-owned residence;
- 16 4. Shall be provided:
- a. In accordance with applicable state and local building codes; and
- b. By a vendor who shall be in good standing with the Office of the Secretary of State
- of the Commonwealth of Kentucky pursuant to 30 KAR 1:010 and 30 KAR 1:020;
- 5. Shall be coordinated and documented by a case manager by:
- a. A description of each adaptation purchased;
- b. A receipts for every adaptation made which shall include the:
- (i) Date of purchase;

- 1 (ii) Description of the item;
- 2 (iii) Quantity and per unit price; and
- 3 (iv) Total amount of the purchase;
- 4 c. The signature and title of the case manager; and
- 5 d. The date the entry was made in the record; and
- 6. Shall be limited to \$8,000 per lifetime.
- 7 (b) An immediate family member, guardian, or legally responsible individual of a par-
- 8 ticipant shall not be eligible to be a vendor or provider of an environmental accessibility
- 9 service for the participant.
- (c) A home accessibility modification shall not be furnished to a participant who re-
- ceives residential habilitation services except if the services are furnished in the partici-
- 12 pant's own home.
- (d) A request shall be documented in a participant's POC and include cost of adapta-
- 14 tions.
- 15 (11)(a) Goods and services shall:
- 1. Be services, equipment, or supplies that are individualized to a participant who
- 17 chooses to use participant direct services;
- 2. Be utilized to reduce the need for personal care or to enhance independence with-
- in a participant's home or community;
- 3. Not be a good or service available to a recipient outside of the department's SCL
- 21 waiver program;
- 4. meet the following requirements:
- a. The good or service shall decrease the need for other Medicaid services;

- b. The good or service shall promote participant inclusion in the community;
- c. The good or service shall increase a participant's safety in the home environment;
- 3 and
- d. The participant shall not have the funds to purchase the good or service;
- 5. If participant directed and purchased from a participant directed budget, be prior
- 6 authorized;
- 7 6. Not include experimental or prohibited treatments;
- 7. Be clearly linked to a participant need that has been documented in the partici-
- 9 pant's POC;
- 8. Be coordinated and documented by a case manager by:
- a. Description or itemized line item of purchase and cost;
- b. Receipts for procurements which include the date of purchase;
- c. The signature and title of the case manager; and
- d. The date the entry was made in the record; and
- 9. not exceed \$1,800 per one (1) year authorized POC period.
- (b) A purchase of a good or service shall not circumvent other restrictions on SCL
- 17 waiver services:
- 1. Established in this administrative regulation; and
- 2. Including the prohibition against claiming for the costs of room and board.
- 20 (c) An immediate family member, guardian, or legally responsible individual of a par-
- 21 ticipant shall not be a provider of participant directed goods and services to the partici-
- 22 pant.
- (e) A case manager shall submit reimbursement documentation to the financial man-

- 1 agement agency.
- 2 (f) Equipment purchased as a good shall become the property of the participant.
- 3 (12)(a) Natural supports training shall:
- 1. Shall be provided by a qualified entity as identified in the POC;
- 5 2. Be participant directed and include:
- a. Training and education to individuals who provide unpaid support, training, com-
- 7 panionship, or supervision to participants;
- b. Instruction about treatment regimens and other services specified in the partici-
- 9 pant's POC;
- 10 c. Instruction on current best practices;
- d. The costs of registration and training fees associated with formal instruction in are-
- as relevant to the participant's needs identified in the participant's POC; or
- e. Training provided by a member of the participant's community regarding specific
- interests of the participant and how the natural support network shall support the partic-
- ipant's inclusion in activities and events surrounding the area of interest;
- 3. Be individualized, direct training of families and natural support networks for acqui-
- sition or enhancement of their ability to support the participant;
- 4. Relate to needs identified in a participant's person centered POC and be tied to a
- 19 specific goal in the POC;
- 5. Not duplicate or occur simultaneously with any education or training provided
- 21 through:
- 22 a. Physical therapy services;
- b. Occupational therapy services;

- 1 c. Speech and language therapy services;
- d. Consultative clinical and therapeutic services; or
- e. Positive behavior support services;
- 4 6. Be provided in:
- a. A participant's own home or a participant's family's home; or
- b. Community setting specific to community-based natural supports training goals
- 7 specified in the participant's POC;
- 8 7. Not include:
- a. Services reimbursable by any other support;
- b. Training paid caregivers;
- c. Costs of travel, meals, or overnight lodging to attend a training event or confer-
- 12 ence; or
- d. Services not related to the needs of the participant;
- 14 8. Be coordinated and documented by a case manager by:
- a. The specific training provided;
- b. The date and the beginning and ending time when the service was provided;
- 17 c. The service location;
- d. The receipts or verification of service provision, including first and last name and
- title (if applicable) of the person providing the service and the signature of the person
- 20 providing the service;
- e. Verification of registration and certificate of attendance at any formal training; and
- f. The progress made in moving the participant towards independence as reflected in
- 23 goals and the participant's POC; and

- 9. Not exceed \$1,000 per one (1) year authorized POC period.
- 2 (b) An immediate family member, guardian, or legally responsible individual of a par-
- 3 ticipant shall not be eligible to be a participant directed provider of natural supports
- 4 training services for the participant.
- 5 (c) For purposes of natural supports training, an individual shall be defined as any
- 6 person, family member, neighbor, friend, companion, or coworker who provides uncom-
- 7 pensated care, training, guidance, companionship, or support to the participant who uti-
- 8 lizes natural supports training.
- 9 (d) A case manager shall submit reimbursement documentation to the financial man-
- 10 agement agency.
- 11 (13) Occupational therapy shall:
- 12 (a) Be provided by:
- 1. A person who meets the personnel and training requirements established in Sec-
- tion 3 of this administrative regulation; and
- 15 2. Is either an:
- a. Occupational therapist; or
- b. Occupational therapy assistant; and
- 18 2. Order of a physician;
- (b) Be evaluation and therapeutic services that are not available to a participant out-
- side of a 1915(c) home and community based waiver program;
- 21 (c) Include:
- 1. Evaluation of a participant and the participant's environment;
- 23 2. Therapeutic activities to improve functional performance;

- 3. Sensory integrative techniques to enhance sensory processing and promote adap-
- 2 tive responses to environmental demands; and
- 4. Participant and family education;
- 4 (d) Facilitate maximum independence by establishing life skills with an emphasis on
- 5 safety and environmental adaptation to improve quality of life and increase meaning and
- 6 purpose in daily living and community integration;
- 7 (e) Promote fine motor skills, coordination, sensory integration, and facilitate the use
- 8 of adaptive equipment or other assistive technology;
- 9 (f) Include, as needed, coordination of program wide support addressing assessed
- needs, conditions, or symptoms affecting a participant's ability to fully participate in the
- 11 participant's community;
- (g) Include the development of a home treatment or support plan with training and
- technical assistance provided on-site to improve the ability of paid and unpaid caregiv-
- ers to carry out therapeutic interventions;
- (h) Be delivered in a participant's home or in the community as described in the par-
- 16 ticipant's POC;
- 17 (i) Include monitoring:
- 1. Of the fidelity of data reporting and participant's POC implementation;
- 2. Of the effectiveness of the participant's POC;
- 3. Of the impact of the participant's POC on the participant, the participant's environ-
- 21 ment, and system of supports; and
- 4. Which shall be conducted:
- a. In the settings where the participant's POC is implemented;

- b. Through discussions and observations of people implementing the participant's
- 2 POC; and
- c. Through reporting data;
- 4 (j) Be documented by a note documenting each contact which shall include:
- 5 1. A full description of each service rendered;
- 2. Evidence of progress toward the participant's outcome or outcomes;
- 7 3. Identification of barriers to achievement of outcomes;
- 4. The projected plan to achieve the next step in achievement of outcomes;
- 9 5. The date of the service;
- 10 6. The location of the service;
- 7. The beginning and ending time of the service;
- 8. The signature and title of the person providing the service;
- 9. The date the entry was made in the record; and
- 10. The signature and title of the occupational therapist supervising the occupational
- therapy assistant and date of the documentation review, if applicable;
- (k) Not be available to a participant under the age of twenty-one (21);
- (I) Not supplant an educational service available under the Individuals with Disabili-
- ties Education Act (20 U.S.C. 101 et seq.); and
- (m) Be limited to fifty-two (52) fifteen (15) minute units per month.
- 20 (14)(a) Person centered coaching shall:
- 1. Be provided by a person centered coach who shall:
- a. Operate independently of a residential or day training provider;
- b. Work under the direction of a positive behavior support specialist or other licensed

- 1 professional in the settings where the POC is implemented; and
- c. Meet the personnel and training requirements specified in Section 3 of this admin-
- 3 istrative regulation;
- 4 2. Be an individualized service to be utilized when a barrier challenges the success of
- 5 a participant in achieving the participant's goals;
- 6 3. Include:
- a. The provision of training developed in conjunction with certified or licensed profes-
- sionals from the participant's person centered team, to the participant, family, guardian,
- 9 natural and paid supports on implementation of all or designated components of the
- 10 participant's POC;
- b. Monitoring the effectiveness of person centered planning as demonstrated by the
- support system's implementation of the POC or designated components across the ar-
- ray of service settings and reporting of required and pertinent data; and
- c. Data collection which shall be utilized by the participant's person centered team to
- modify the environment or POC as needed;
- 4. Not duplicate case management or any other service;
- 5. Not supplant an educational service available under the Individuals with Disabilities
- 18 Education Act (20 U.S.C. 101 et seq.); and
- 6. Be limited to 1,320 fifteen (15) minute units per year.
- 20 (b) An individualized service shall be outcome-based with a plan for the gradual with-
- 21 drawal of the services.
- (c) A person centered coach shall not be considered as part of a staffing ratio, plan,
- 23 or pattern.

- 1 (d) Documentation of a person centered coaching service shall include:
- 2 1. A note documenting each contact which shall include:
- a. A full description of each service rendered;
- 4 b. The date of the service;
- 5 c. The location of the service;
- d. The beginning and ending time of the service;
- 7 e. The signature and title of the individual providing the service;
- 8 f. The date the entry was made in the record; and
- 9 2. A completed monthly summary note which shall include:
- a. The month and year for the time period the note covers;
- b. A summary of the service provided including recommendations and identification
- of additional support needs if any exist;
- c. The signature and title of the individual completing the note;
- d. The date the note was written; and
- e. The signature, title, and date of review of documentation by the positive behavior
- specialist or other licensed professional directing the work of the person centered
- 17 coach.
- 18 (15) Personal assistance services:
- 19 (a) Shall be provided by a direct support professional;
- 20 (b) Shall enable a participant to accomplish tasks that the participant normally would
- 21 do for himself or herself if the participant did not have a disability;
- (c) Shall be available only to a participant who lives in the participant's own residence
- or in the participant's family residence;

- 1 (d) May be participant directed and if participant directed, may be provided by an im-
- 2 mediate family member, guardian, or legally responsible individual of the participant in
- 3 accordance with Section 5 of this administrative regulation;
- 4 (e) Shall include:
- 5 1. Hands-on assistance (performing a task for a participant);
- 2. Reminding, observing, guiding, or training a participant in activities of daily living;
- 7 3. Reminding, observing, guiding, or training a participant in independent activities of
- 8 daily living;
- 9 4. Assisting a participant in managing the participant's medical care including making
- medical appointments and accompanying the participant to medical appointments; or
- 5. Transportation, which is not otherwise available under the Medicaid Program, to
- access community services, activities, and appointments;
- (f) Shall take place in a participant's home or in the community as appropriate to the
- 14 participant's need;
- (g) Shall not be available to a participant:
- 16 1. Receiving paid residential supports; or
- 2. Under the age of twenty-one (21) if medically necessary personal assistance is
- available as an early and periodic screening, diagnostic, and treatment service;
- (h) Shall not supplant an educational service available under the Individuals with Dis-
- 20 abilities Education Act (20 U.S.C. 1401 et seq.); and
- 21 (i) Shall be documented by:
- 1. A note for each contact which shall include:
- a. A full description of each service rendered;

- b. Evidence of training or service to support outcomes designated in the participant's
- 2 POC as appropriate;
- 3 c. The date of the service;
- d. The location of the service;
- 5 e. The beginning and ending time of the service;
- 6 f. The signature and title of the direct support professional providing the service; and
- 7 g. The date the entry was made in the record; and
- 8 2. A detailed monthly summary note which shall include:
- a. The month and year for the time period the note covers;
- b. Evidence of progress toward the participant's outcome or outcomes;
- c. Identification of barriers to achievement of outcome or outcomes;
- d. Projected plan to achieve the next step in achievement of outcome or outcomes;
- e. The signature and title of the direct support professional completing the note;
- 14 f. The date the note was written; and
- g. The signature, title, and date the documentation was reviewed by the direct sup-
- port professional supervisor supervising the direct support professional.
- 17 (16) Physical therapy shall:
- (a) Include evaluation or therapeutic services that are not available to a participant
- outside of a 1915(c) home and community based waiver program;
- 20 (b) Address physical therapy needs that result from a participant's developmental
- 21 disability;
- (c) Facilitate a participant's independent functioning or prevent progressive disabili-
- 23 ties:

- 1 (d) Include:
- 2 1. Evaluation;
- 3 2. Therapeutic procedures;
- 4 3. Therapeutic exercises to increase range of motion and flexibility;
- 5 4. Participant or family education;
- 5. Assessment of a participant's environment;
- 7 6. If needed, development of a home treatment or support plan with training and
- 8 technical assistance provided on-site to improve the ability of paid and unpaid caregiv-
- 9 ers to carry out therapeutic interventions;
- 7. As needed, coordination of program wide support addressing assessed needs,
- conditions, or symptoms affecting a participant's ability to fully participate in the com-
- 12 munity;
- 13 8. Monitoring:
- a. Of the fidelity of data reporting and participant's POC implementation;
- b. Of the effectiveness of the participant's POC;
- 16 c. Of the impact of the participant's POC on the participant, the participant's environ-
- ment, and system of supports; and
- d. Which shall be conducted:
- (i) In the settings where the participant's POC is implemented;
- 20 (ii) Through discussions and observations of people implementing the participant's
- 21 POC; and
- 22 (iii) Through reporting data;
- (e) Be provided by:

- 1. A person who meets the personnel and training requirements established in Sec-
- 2 tion 3 of this administrative regulation; and
- 3 2. Is either:
- 4 a. A physical therapist; or
- 5 b. A physical therapist assistant; and
- 6 2. An order of a physician;
- 7 (f) Be delivered in a participant's home or in the participant's community as described
- 8 in the participant's POC;
- 9 (g) Not be available to a participant under the age of twenty-one (21) years;
- (h) Not supplant educational services available under the Individuals with Disabilities
- 11 Education Act (20 U.S.C. 1401 et seq.);
- (i) Be documented by a note documenting each contact which shall include:
- 13 1. A full description of each service rendered;
- 2. Evidence of progress toward the participant's outcome or outcomes;
- 3. Identification of barriers to achievement of outcomes;
- 4. The projected plan to achieve the next step in achievement of outcomes;
- 5. The date of the service;
- 18 6. The location of the service;
- 7. The beginning and ending time of the service;
- 20 8. The signature and title of the person providing the service;
- 9. The date the entry was made in the record; and
- 10. The signature and title of the physical therapist supervising the physical therapist
- assistant and date of the documentation review if applicable; and

- 1 (j) Be limited to fifty-two (52) fifteen (15) minute units per month.
- 2 (17)(a) Positive behavior supports shall include:
- 1. The utilization of evidenced based and best practices in behavioral techniques, in-
- 4 terventions, and methods to assist a participant with significant, intensive challenges
- 5 which interfere with activities of daily living, social interaction, or work;
- 2. Evidenced based or best practices regarding treatment of a behavioral health con-
- 7 dition which shall be the primary support services if supplemental behavioral interven-
- 8 tions are needed; and
- 9 3. A positive behavior support plan which shall:
- a. Be clearly based upon the information, data collected, and recommendations from
- the functional assessment;
- b. Meet the primary purpose of having the participant acquire or maintain skills for
- community living while behavioral interventions are delivered for the reduction of signifi-
- cant challenges which interfere with activities of daily living, social interaction, or work;
- c. Be developed with the participant and participant's person centered team;
- d. Be related to goals of interventions, such as greater participation in activities, en-
- 17 hanced coping or social skills;
- e. Include all the positive behavior support components specified in the Supports for
- 19 Community Living Policy Manual;
- f. Be revised whenever necessary; and
- g. Be implemented across service settings by the various people, both paid and natu-
- ral supports, assisting a participant to reach the participant's goals and dreams.
- 23 (b) Positive behavior supports shall be provided by a positive behavior support spe-

- 1 cialist.
- 2 (c) Behavioral health treatment and positive behavioral supports shall be utilized in a
- 3 collaborative manner.
- 4 (d) One (1) unit of positive behavior supports shall equal one (1) plan.
- 5 (e) Positive behavior supports shall be billed in accordance with 907 KAR 12:020.
- 6 (18) Residential support services shall:
- 7 (a) Be authorized for a participant based upon information from the participant's Sup-
- 8 ports Intensity Scale assessment, Health Risk Screening Tool assessment, and ap-
- 9 proved person centered POC;
- 10 (b) Include:
- 1. Level I residential supports;
- 12 2. Technology assisted residential supports; or
- 3. Level II residential supports; and
- (c) Be documented by a:
- 1. Daily note which shall include:
- a. Information about how a participant spent the day including any effort toward meet-
- ing any outcome identified in the participant's POC;
- b. The date of the service;
- c. The location of the service;
- d. The signature and title of the individual providing the service; and
- e. The date the entry was made in the record; and
- 22 2. Detailed monthly summary note which shall include:
- a. The month and year for the time period covered by the note;

- b. An analysis of progress toward a participant's outcome or outcomes;
- c. A projected plan to achieve the next step in achievement of an outcome or out-
- 3 comes;
- d. Information regarding events that occurred that had an impact on the participant's
- 5 life;
- e. The signature and title of the individual writing the note;
- 7 f. The date the note was written; and
- g. The signature, title, and date of documentation review by the direct support profes-
- 9 sional supervisor providing supervision to the direct support professional.
- 10 (19)(a) Level I residential supports shall:
- 1. Be furnished in a provider-owned or leased residence which complies with the
- Americans with Disabilities Act based upon the needs of each participant receiving a
- 13 support in the residence;
- 2. Be for a participant who requires a twenty-four (24) hour a day, intense level of
- 15 support;
- 3. Include no more than five (5) unsupervised hours per day per participant:
- a. To promote increased independence; and
- b. Which shall be based on the:
- (i) Needs of the participant as determined by the participant's person centered team;
- 20 and
- 21 (ii) Participant's POC;
- 4. Include:
- a. Adaptive skill development;

- b. Assistance with activities of daily living including bathing, dressing, toileting, trans-
- 2 ferring, or maintaining continence;
- 3 c. Community inclusion;
- d. Adult education supports;
- 5 e. Social and leisure development;
- 6 f. Protective oversight or supervision;
- 7 g. Transportation;
- 8 h. Personal assistance; and
- 9 i. The provision of medical or health care services that are integral to meeting the
- 10 participant's daily needs; and
- 5. Be outlined in a participant's POC.
- (b) Level I residential supports shall be provided by a:
- 1. Staffed residence which:
- a. Has been certified:
- (i) By the department to be an SCL waiver provider; and
- (ii) By DBHDID to provide level I residential supports; and
- b. Shall have no more than three (3) participants receiving publicly-funded supports
- in a home leased or owned by the provider; or
- 19 2. Group home which:
- a. Has been certified:
- 21 (i) By the department to be an SCL waiver provider; and
- 22 (ii) By DBHDID to provide level I residential supports; and
- b. Shall have no more than eight (8) participants in the group home.

- 1 (c)1. For a participant approved for unsupervised time, a safety plan shall be included
- in the participant's POC based upon the participant's assessed needs.
- 2. A participant's case manager and other person centered team members shall en-
- 4 sure that a participant is able to implement a safety plan.
- 5 3. A participant's case manager shall provide ongoing monitoring of the safety plan,
- 6 procedures, or assistive devices required by a participant to ensure relevance, the par-
- 7 ticipant's ability to implement the safety plan, and the functionality of the devices if re-
- 8 quired.
- 9 (d) If a participant experiences a change in support needs or status, the participant's
- person centered team shall meet to make the necessary adjustments in the:
- 1. Participant's POC; and
- 12 2. Residential services to meet the participant's needs.
- (e) A level I residential support provider shall employ staff who shall be a:
- 1. Direct support professional; or
- 2. Direct support professional supervisor if providing supervision.
- 16 (20)(a) Technology assisted residential services shall:
- 17 1. Be furnished in a participant's residence:
- a. Which complies with the Americans with Disabilities Act based upon the needs of
- each participant receiving a support in the residence; and
- b. To three (3) or fewer participants who reside in the residence with twenty-four (24)
- 21 hour staff support;
- 22 2. Be for a participant who:
- a. Requires up to twenty-four (24) hours a day of support; and

- b. Is able to increase his or her level of independence with a reduced need for onsite
- 2 staff;
- 3. Include, to the extent required for a participant:
- a. Protective oversight or supervision;
- 5 b. Transportation;
- 6 c. Personal assistance; or
- d. The provision of medical or health care services that are integral to meeting the
- 8 participant's daily needs;
- 9 4. Increase a participant's independence without undue risk to the participant's health
- 10 or safety;
- 5. Be a real-time monitoring system with a two (2) way method of communication
- linking a participant to a centralized monitoring station; and
- 6. Be allowed to include:
- a. An electronic sensor;
- b. A speaker or microphone;
- c. A video camera which shall not be located in a bedroom or a bathroom;
- d. A smoke detector; or
- e. A personal emergency response system.
- (b)1. A device listed in paragraph (a)6. of this subsection shall link a participant's res-
- idence to remote staff employed to provide electronic support.
- 2. A technology assisted residential service provider shall have a plan established to
- ensure that staff is available twenty-four (24) hours a day, seven (7) days a week for a
- 23 participant or participants receiving services from the provider.

- 1 (c) Technology shall be used by the technology assisted residential service provider
- 2 to assist a participant in residing in the most integrated setting appropriate to the partici-
- 3 pant's needs.
- 4 (d) The level and types of technology assisted residential services provided to a par-
- 5 ticipant shall be:
- 1. Determined by a participant's person centered team; and
- 7 2. Outlined in a participant's POC.
- 8 (e) A participant's person centered team shall give careful consideration to the partic-
- 9 ipant's medical, behavioral, and psychiatric condition in determining the level and types
- of technology assisted residential services needed for a participant.
- (f) The use of technology to reduce a participant's need for residential staff support in
- a residence may be utilized if there is an individualized person centered POC which has
- been developed to promote a participant's increased independence:
- 1. Based on the participant's needs as indicated in the scores and results of the Sup-
- ports Intensity Scale assessment and Health Risk Screening Tool assessment; and
- 2. As recommended by the participant's person centered team.
- (g)1. If a participant experiences a change in support need or status, the technology
- 18 assisted residential service provider shall:
- a. Immediately adjust the participant's supervision to meet any acute need of the par-
- 20 ticipant; and
- b. Reassess the appropriateness of technology assisted residential services and
- 22 make any adjustment, if needed, to meet any chronic support need of the participant.
- 23 2. Any adjustment shall be made in collaboration with the participant's case manager

- and person centered team if the adjustment is to be implemented for a period longer
- than what was determined by the participant's person centered team when developing
- 3 the participant's POC.
- 4 (h) A technology assisted residential service provider shall:
- 1. Be responsible for arranging or providing a participant's transportation between the
- 6 participant's residence and any other service site or community location;
- 7 2. Employ staff who:
- 8 a. Shall be a:
- (i) Direct support professional; or
- (ii) Direct support professional supervisor if providing supervision; and
- 11 b. Demonstrate:
- (i) Proficiency in the individual's ability to operate all monitoring devices utilized in
- 13 technology assisted residential services; and
- (ii) The ability to respond appropriately to the needs of participants in a timely man-
- 15 ner; and
- 16 3. Have daily contact with the participant.
- 17 (21)(a) Level II residential supports shall:
- 1. Be for a participant who requires up to a twenty-four (24)-hour level of support;
- 2. Be a support tailored to a participant to assist the participant with acquiring, retain-
- 20 ing, or improving skills related to living in a community;
- 3. Be designed and implemented to assist a participant to reside in the most integrat-
- 22 ed setting appropriate to the participant's needs;
- 4. Provide support for a participant up to twenty-four (24) hours a day; and

- 1 5. Be furnished in:
- a. An adult foster care home;
- 3 b. A family home provider; or
- 4 c. A participant's own home.
- 5 (b) Level II residential supports shall be provided by:
- 1. An adult foster care provider which:
- 7 a. Has been certified:
- 8 (i) By the department to be an SCL waiver provider; and
- 9 (ii) By DBHDID to provide level II residential supports; and
- b. Shall have no more than three (3) participants who are:
- (i) Aged eighteen (18) years or older; and
- (ii) Receiving publicly-funded supports and living in the home; or
- 13 2. A family home provider which:
- 14 a. Has been certified:
- (i) By the department to be an SCL waiver provider; and
- (ii) By DBHDID to provide level II residential supports; and
- b. Shall have no more than three (3) participants receiving publicly-funded supports
- 18 living in the home.
- (c) A level II residential support provider shall employ staff who shall be a:
- 20 1. Direct support professional; or
- 2. Direct support professional supervisor if providing supervision.
- 22 (d) If a participant experiences a change in support need or status, the level II resi-
- 23 dential services provider shall adjust services provided to the participant to meet the

- 1 participant's altered need or status. (22) Respite: 2 (a) Shall: 3 1. Be provided to a participant who: 4 a. Does not receive residential services; 5 b. Resides in the participant's own home or family's home; and 6 c. Is unable to independently administer self-care; 7 2. Be provided: 8 9 a. In a variety of settings; b. By a direct support professional; and 10 c. On a short-term basis due to the absence or need for relief of an individual provid-11 ing care to a participant; 12 3. Documented by a contact note which shall include: 13 a. The date of the service; 14 b. The beginning and ending time of the service; 15 c. A full description of each service rendered; 16 d. The signature and title of the individual providing the service; and 17 e. The date the entry was made in the record; and 18 4. Not exceed 830 hours per calendar year; and 19
- 20 (b) May be participant directed and if participant directed, may be provided by an im-
- 21 mediate family member or guardian of the participant in accordance with Section 5 of
- 22 this administrative regulation.
- 23 (23)(a) Shared living shall be a participant directed service designed to:

- 1. Be an alternative to residential support services; and
- 2. Be provided by a shared living caregiver who provides some of the participant's
- 3 supports in exchange for the caregiver's share of room and board expenses.
- 4 (b) A payment for the portion of the costs of rent or food attributable to an unrelated
- 5 personal caregiver shall be routed through the financial management agency specifical-
- 6 ly for reimbursing the participant.
- 7 (c) If two (2) participants choose to live together in a home, the two (2) may share a
- 8 caregiver.
- 9 (d) Depending upon the need of a participant, a caregiver may provide:
- 1. Assistance with the acquisition, retention, or improvement in skills related to activi-
- 11 ties of daily living; or
- 2. Supervision required for safety or the social and adaptive skills necessary to ena-
- ble the participant to reside safely and comfortably in the participant's own home.
- 14 (e) Shared living services shall:
- 1. Address a participant's needs identified in the participant's person centered plan-
- 16 ning process;
- 2. Be outlined in the participant's POC;
- 3. Be specified in a contractual agreement between the participant and the caregiver;
- 19 and
- 4. Complement other services the participant receives and enhance increased inde-
- 21 pendence for the participant.
- (f) A participant's person centered team shall decide and ensure that the individual
- who will serve as the participant's caregiver has the experience, skills, training, and

- 1 knowledge appropriate to the participant and the type of support needed.
- 2 (g) A participant's caregiver shall meet direct support professional qualifications in
- accordance with Section 1(24) of this administrative regulation.
- 4 (h) Room and board expenses for an unrelated caregiver living with a participant
- 5 shall be:
- 1. Reflected in the participant's person centered POC; and
- 7 2. Specified in the contractual agreement between the participant and the caregiver.
- 8 (i) A payment shall not be made if a participant lives in the caregiver's home or in a
- 9 residence that is owned or leased by an SCL provider.
- (j) Documentation shall:
- 1. Be maintained by a participant's case manager; and
- 12 **2. Include:**
- a. A dated monthly summary note that is written by the case manager and details
- 14 how services were provided according to the contractual agreement and the partici-
- pant's person centered POC;
- b. A monthly receipt for the caregiver's room and board expenses that were reim-
- 17 bursed to the participant;
- c. The signature and title of the case manager writing the note;
- d. The date the note was written;
- e. A signed and dated statement from the participant or the participant's guardian in-
- 21 dicating that the participant is satisfied with the services provided by the caregiver; and
- f. The signature, title and date of documentation review by the case manager super-
- 23 visor who is supervising the case manager.

- 1 (k) Shared living shall not exceed \$600 per month.
- 2 (24)(a) Specialized medical equipment and supplies shall:
- 1. Include a device, control, or appliance specified in a participant's POC which shall:
- a. Be necessary to ensure the health, welfare, and safety of the participant; or
- b. Enable the participant to function with greater independence in the home;
- 2. Include assessment or training needed to assist a participant with mobility, seating,
- 5 bathing, transferring, security, or other skills including operating a wheelchair, a lock, a
- 8 door opener, or a side lyre;
- 9 3. Include a computer necessary for operating communication devices, a scanning
- communicator, a speech amplifier, a control switch, an electronic control unit, a wheel-
- 11 chair, a lock, a door opener, or a side lyre;
- 4. Include customizing a device to meet a participant's needs;
- 5. Include partial nutrition supplements, special clothing, an enuresis protective
- chuck, or another authorized supply that is specified in the participant's POC;
- 6. Include an ancillary supply necessary for the proper functioning of an approved
- 16 device;
- 7. Be identified in a participant's POC;
- 8. Be recommended by a person whose signature shall verify the type of specialized
- equipment or supply that is necessary to meet the participant's need; and who
- a. Meets the personnel and training requirements established in Section 3 of this ad-
- 21 ministrative regulation and is a:
- (i) An occupational therapist;
- (ii) A physical therapist;

- 1 (iii) A speech therapist; or
- b. Is a certified or licensed practitioner whose scope of practice includes the evalua-
- 3 tion and recommendation of specialized equipment or supplies;
- 9. Not include equipment, a supply, an orthotic, prosthetic, service, or item covered
- 5 under the department's:
- a. Durable medical equipment program pursuant to 907 KAR 1:479;
- b. Hearing services program pursuant to 907 KAR 1:038 or 907 KAR 1:039; or
- 8 c. EPSDT program pursuant to 907 KAR 11:034 or 907 KAR 11:035; and
- 9 10. Be coordinated and documented by a case manager by:
- a. A description or itemized line item of purchase and cost;
- b. Receipts for procurements which include the date of purchase;
- c. The signature and title of the case manager;
- d. The date the entry was made in the record; and
- e. The signature, title, and date of the documentation review by the case manager
- supervisor providing supervision to the case manager.
- (b) Equipment purchased pursuant to this subsection for a participant shall become
- the property of the participant.
- 18 (25) Speech therapy shall:
- 19 (a) Be provided by:
- 20 1. A speech language pathologist who meets the personnel and training require-
- 21 ments established in Section 3 of this administrative regulation; and
- 22 2. An order of a physician;
- 23 (b) Include:

- 1. Evaluation or therapeutic services that are not available to a participant outside of
- 2 a 1915(c) home and community based waiver program;
- 2. Speech and language therapy evaluation;
- 4 3. Individual treatment of voice;
- 5 4. Communication;
- 6 5. Auditory processing;
- 7 6. Therapeutic services for the use of a speech-device including:
- a. Programming and modification; or
- b. Participant and family education;
- 7. Development of a home treatment or support plan with training and technical as-
- sistance provided on site to improve the ability of paid and unpaid caregivers to carry
- out therapeutic interventions;
- 8. As needed, coordination of program-wide support addressing assessed needs,
- conditions, or symptoms affecting a participant's ability to fully participate in the partici-
- 15 pant's community;
- 16 9. Monitoring:
- a. Of the fidelity of data reporting and participant's POC implementation;
- b. Of the effectiveness of the participant's POC;
- c. Of the impact of the participant's POC on the participant, the participant's environ-
- 20 ment and system of supports; and
- d. Which shall be conducted:
- 22 (i) In the settings where the participant's POC is implemented;
- 23 (ii) Through discussions and observations of people implementing the participant's

- 1 POC; and
- 2 (iii) Through reporting data;
- 3 (c) Preserve abilities for independent function in communication, motor and swallow-
- 4 ing functions, facilitate use of assistive technology, and prevent regression;
- 5 (d) Be delivered in a participant's home or in the participant's community as de-
- 6 scribed in the participant's POC;
- 7 (e) Not be available to a participant under the age of twenty-one (21) years;
- 8 (f) Not supplant educational services available under the IDEA (20 U.S.C. 1401 et
- 9 seq.); and
- (g) Be documented by a note documenting each contact which shall include:
- 1. A full description of each service rendered;
- 2. Evidence of progress toward the participant's outcome or outcomes;
- 3. Identification of barriers to achievement of outcomes;
- 4. The projected plan to achieve the next step in achievement of outcomes;
- 5. The date of the service;
- 6. The location of the service;
- 7. The beginning and ending time of the service;
- 8. The signature and title of the speech language pathologist providing the service;
- 19 and
- 20 9. The date the entry was made in the record; and
- (h) Be limited to fifty-two (52) fifteen (15) minute units per month.
- 22 (26)(a) Supported employment shall be funded by the Rehabilitation Act of 1973 (29
- U.S.C. Chapter 16) or Individuals with Disabilities Education Act (IDEA) (20 U.S.C. 1401

- et seq.) for a participant if funding is available under either act for the participant.
- 2 (b) If the funding referenced in paragraph (a) of this paragraph is not available for a
- 3 participant, SCL waiver funding may be accessed for the participant for all defined sup-
- 4 ported employment services if there has been no change in the impact of the partici-
- 5 pant's disability on the participant's employment.
- 6 (c) Supported employment shall:
- 7 1. Be covered for a participant if no change in the impact of a participant's disability
- 8 on the participant's employment has occurred and:
- a. A Supported Employment Long-Term Support Plan has been completed and in-
- corporated into the participant's person centered POC; or
- b. There is documentation of the payment of the supported employment individual
- outcome placement fee indicating closure of the case by the Office of Vocational Reha-
- 13 bilitation;
- 2. Be participant directed, if a participant chooses this option;
- 15 3. Be provided:
- a. In a variety of settings;
- b. By a supported employment specialist who:
- (i) Meets the personnel and training requirements established in Section 3 of this
- 19 administrative regulation; and
- 20 (ii) Works for an SCL certified provider that is a vendor of supported employment ser-
- vices for the Office of Vocational Rehabilitation; and
- c. In accordance with the supported employment policies stated in the current Sup-
- 23 ports for Community Living Policy Manual;

- 4. Be delivered on a one (1) to one (1) basis with a participant or indirectly on behalf
- 2 of a participant;
- 5. Exclude work performed directly for the supported employment provider or other
- 4 service provider; and
- 6. Be coordinated with other applicable 1915(c) home and community based waiver
- 6 services, if applicable, in support of the participant's employment outcome.
- 7 (d) Supported employment services delivered on a one-to-one basis and the hours
- 8 spent by a participant performing paid employment and adult day training shall not ex-
- 9 ceed:

23

- 1. Forty (40) hours per week; or
- 11 2. 160 units per week.
- (e) A supported employment service shall be provided and documented as required
- by this paragraph.
- 1. A Person Centered Employment Plan shall be completed by a participant's sup-
- ported employment specialist and updated as needed as required in the Supports for
- 16 Community Living Policy Manual.
- 17 2. A Supported Employment Long-Term Support Plan shall be completed by a partic-
- ipant's supported employment specialist and updated as needed as required in the
- 19 Supports for Community Living Policy Manual.
- 20 3. A Person Centered Employment Plan Activity Note, notes regarding a participant's
- job development activity, notes regarding a participant's job acquisition or stabilization
- 22 activity, and notes regarding a participant's long-term employment support activity shall:
  - a. Be completed by a participant's supported employment specialist to document

- each contact with the participant or action provided on behalf of the participant; and
- 2 b. Contain:
- 3 (i) The date of the service;
- 4 (ii) The beginning time of the service;
- 5 (iii) The ending time of the service;
- 6 (iv) A description of the activity that was conducted;
- 7 (v) The justification of the activity;
- 8 (vi) The results of the activity;
- 9 (vii) The anticipated content of the next activity; and
- (viii) The signature of the supported employment specialist who provided the service.
- 11 (27)(a) A transportation service shall:
- 1. Enable a participant who chooses to use participant directed services to gain ac-
- cess to integrated waiver and other community services, activities, resources, and or-
- 14 ganizations typically utilized by the general population; and
- 2. Only be provided when transportation is not:
- a. Otherwise and customarily available through natural supports including family,
- friends, neighbors, or community agencies; or
- b. Included as an element of another SCL waiver service;
- 3. Include nonemergency travel;
- 4. Be clearly described in a participant's POC which shall include information regard-
- 21 ing the unavailability of other transportation services or resources;
- 5. Be reimbursable based upon the assessed needs of a participant as specified in
- 23 the participant's POC;

- 1 6. Be provided by a driver who:
- a. Is at least eighteen (18) years of age and legally licensed to operate the transport-
- 3 ing vehicle to which the individual is assigned or owns;
- b. Has proof of current liability insurance for the vehicle in which the participant will
- 5 be transported; and
- 6 c. Is an individual or other public transit resource including a local cab or bus service;
- 7 and
- 8 7. Not:
- a. Include transporting a participant to school (through the twelfth grade)];
- b. Be available to a participant who:
- (i) Receives transportation as an element of another covered service;
- (ii) Is receiving a residential service via the SCL waiver program;
- (iii) Has access to transportation under the Individuals with Disabilities Education Act;
- 14 or
- (iv) Customarily receives transportation from a relative.
- (b) A participant shall not contract with an individual to provide transportation if the
- individual has a driving under the influence conviction within the past twelve (12)
- 18 months.
- (c) A transportation service may be provided by an immediate family member, guard-
- ian, or legally responsible individual of the participant in accordance with Section 5 of
- 21 this administrative regulation.
- 22 (d) A case manager shall:
- 1. Coordinate transportation services; and

- 2. Ensure that the following documentation is completed and submitted to the finan-
- 2 cial management agency for direct payment to the approved vendor:
- a. The specific type and purpose of transportation provided;
- 4 b. The date and the beginning and ending time when the service was provided;
- 5 c. The location of origin of the transportation service, destination of the transportation
- 6 service, and the mileage incurred from point to point;
- d. Verification of service delivery, including the first and last name and title (if appli-
- 8 cable) of the individual providing the service; and
- e. A receipt from the driver if a bus, taxicab, or similar type of transportation service in
- which the participant directly purchases the service is utilized.
- 11 (28)(a) A vehicle adaptation shall:
- 1. Be a device, control, or service that enables a participant to:
- a. Increase the participant's independence and physical safety; and
- b. Interact more independently with the participant's environment and reduce the par-
- ticipant's dependence on physical support from others;
- 2. Be made to a participant's or a participant's family's privately owned vehicle;
- 17 3. Include:
- 18 a. A hydraulic lift;
- 19 b. A ramp;
- c. A special seat; or
- d. An interior modification to allow for access into and out of the vehicle as well as
- 22 safety while the vehicle is moving;
- 4. Be limited to \$6,000 per five (5) years per participant;

- 5. Be prior authorized by the department in order to be reimbursable by the depart-
- 2 ment; and
- 3 6. Be coordinated and documented by a case manager by:
- a. Documenting an estimate from a vendor determined to be qualified to complete
- 5 vehicle modifications by the Office of Vocational Rehabilitation;
- b. Documentation from the Office of Vocational Rehabilitation that the participant is
- 7 not qualified to receive a vehicle modification from the Office of Vocational Rehabilita-
- 8 tion;
- 9 c. A description or itemized line item of purchase and cost;
- d. A receipt for procurements which shall include the date of purchase;
- e. Verification by the case manager that the work is complete, adequate, and satis-
- factory within ten (10) business days of completion before payment is requested and is-
- 13 sued:
- f. The signature and title of the case manager; and
- g. The date the entry was made in the record.
- (b) The department's SCL program shall be the payer of last resort for a vehicle ad-
- 17 aptation.
- (c) The need for a vehicle adaptation shall:
- 1. Be documented in a participant's person centered POC; and
- 2. Include an assessment from an occupational therapist or physical therapist spe-
- cializing in vehicle modifications that result in specific recommendations for the type of
- 22 modification to meet the needs of the participant.
- 23 (d) The department shall not reimburse for the repair or replacement costs of a vehi-

- 1 cle adaptation of a vehicle owned by an SCL provider.
- 2 (e) A vehicle adaptation vendor shall be in good standing with the Office of the Sec-
- 3 retary of State of the Commonwealth of Kentucky pursuant to 30 KAR 1:010 and 30
- 4 KAR 1:020.
- 5 (f) An immediate family member, guardian, or legally responsible individual of the
- 6 participant shall not be eligible to be a vendor or provider of a vehicle adaptation service
- 7 for the participant.
- 8 (g) A case manager shall submit reimbursement documentation to the financial man-
- 9 agement agency.
- Section 5. Participant Directed Services (PDS). (1)(a) The following services may be
- participant directed and shall be provided in accordance with the specifications and re-
- quirements established in Section 4 of this administrative regulation, the Supports for
- 13 Community Living Policy Manual, and the training requirements specified in paragraph
- 14 (b) of this subsection:
- 1. Community access services;
- 16 2. Community guide services;
- 17 3. Day training;
- 4. Personal assistance services;
- 19 5. Respite;
- 20 6. Shared living; or
- 7. Supported employment.
- 22 (b) An individual who provides a participant directed service shall complete the fol-
- lowing training requirements in the timeframe established by paragraph (c) of this sub-

- 1 section:
- 1. First aid and cardiopulmonary resuscitation certification by the American Red
- 3 Cross or the American Heart Association;
- 2. If administering or monitoring the administration of a medication, an approved
- 5 DBHDID medication administration curriculum;
- 3. Individualized instruction regarding the participant receiving a support;
- 7 4. The following areas of the Kentucky College of Direct Support modules:
- a. Maltreatment of vulnerable adults and children;
- 9 b. Individual rights and choices;
- 10 c. Safety at home and in the community;
- d. Supporting healthy lives; and
- e. Person centered planning; and
- 5. Other training if required by the participant.
- (c) The training required by paragraph (b) of this subsection shall be completed:
- 1. Within six (6) months of the date of hire for a new provider of a participant-directed
- 16 service; or
- 2. Within one (1) year of the effective date of this administrative regulation for an em-
- ployee providing a participant-directed service on the effective date of this administra-
- 19 tive regulation.
- 20 (2) An individual providing a participant directed service to more than three (3) partic-
- ipants in the same household or different households shall complete all provider training
- requirements as specified in Section 3 of this administrative regulation.
- 23 (3)(a) The following services may be participant directed and shall be provided in ac-

- 1 cordance with the specifications and requirements established in the Supports for
- 2 Community Living Manual and in Section 4 of this administrative regulation:
- Environmental accessibility adaptation services;
- 4 2. Goods and services;
- 5 3. Natural supports training;
- 4. Transportation services; or
- 7 2. Vehicle adaptation services.
- 8 (b) A participant directed service shall not be available to a participant who resides in
- a living arrangement, regardless of funding source, that is furnished to four (4) or more
- individuals who are unrelated to the proprietor.
- (4) An immediate family member or guardian of a participant may provide a support
- to a participant directed service if:
- (a) Allowed to do so pursuant to Section 4 of this administrative regulation;
- (b) The family member or guardian has the unique abilities necessary to meet the
- needs of the participant;
- (c) The service is not something normally provided by the family member or guardian
- to the participant;
- (d) Delivery of the service by the family member or guardian is cost effective;
- (e) The use of the family member or guardian is age and developmentally appropri-
- 20 ate;
- 21 (f) The use of the family member or guardian enables the participant to:
- 1. Learn and adapt to different people; and
- 23 2. Form new relationships;

- 1 (g) The participant learns skills to increase independence;
- 2 (h) Having the family member or guardian provide the service:
- 1. Truly reflects the participant's wishes and desires;
- 4 2. increases the participant's quality of life in measurable ways;
- 5 3. Increases the participant's level of independence;
- 4. Increases the participant's choices; and
- 5. Increases the participant's access to the amount of service hours for needed sup-
- 8 port; and
- 9 (i)1. There is no qualified provider within thirty (30) miles from the participant's resi-
- 10 dence; or
- 2. There is no qualified provider who can furnish the service at the necessary times
- 12 and places.
- (5) A legally responsible individual may provide a service to a participant if:
- (a) Allowed to do so pursuant to Section 4 of this administrative regulation;
- (b) The legally responsible individual meets the requirements established for a family
- member or guardian in subsection (4) of this section;
- (c) The service exceeds the range of activities that a legally responsible individual
- would ordinarily provide in a household on behalf of a person:
- 1. Without a disability; and
- 20 2. Of the same age; and
- 21 (d) The service is necessary to:
- 1. Assure the health and welfare of the participant; and
- 23 2. Avoid institutionalization.

- 1 (6) An individual serving as a representative for a participant shall not be eligible to
- 2 provide a waiver service to the participant.
- 3 (7) A participant directed reimbursement service shall be provided by a financial
- 4 management agency with whom the department contracts that shall:
- 5 (a) Only pay for service identified and prior authorized in a participant's POC;
- 6 (b) Ensure compliance with all Internal Revenue Service regulations, United States
- 7 Department of Labor regulations, and Kentucky Department of Workers' Claims admin-
- 8 istrative regulations regarding workers' compensation;
- 9 (c) Process employer-related payroll and deposit and withhold necessary mandatory
- 10 employer withholdings;
- (d) Receive, disburse, and track public funds based on a participant's approved POC;
- 12 (e) Provide:
- 1. A participant and the participant's case manager with payroll reports semi-monthly;
- 2. Additional payroll information to a participant's case manager on a per request ba-
- 15 sis; and
- 16 3. Reports to DBHDID.
- 17 (8)(a) A participant may voluntarily disenroll from a participant directed service at any
- 18 time.
- (b) If a participant elects to disenroll from a participant directed service, the partici-
- 20 pant's case manager shall assist the participant and the participant's quardian to locate
- a traditional waiver service provider of the participant's choice to provide the service.
- (c) 1. Except as provided in subparagraph 2. Of this paragraph, a participant directed
- 23 service shall not be terminated until a traditional service provider is ready to provide the

- 1 service.
- 2. If a participant does not wish to continue receiving the service, the service shall be
- 3 terminated.
- 4 (9)(a) If case management monitoring reveals that a participant's health, safety, or
- welfare is being jeopardized, the participant's case manager shall:
- 1. Develop a corrective action plan in conjunction with the participant, the partici-
- 7 pant's guardian, and any other person centered team member; and
- 8 2. Monitor the progress of the corrective action plan and resulting outcomes to re-
- 9 solve the health, safety, or welfare issue.
- (b) If the health, safety, or welfare issue referenced in paragraph (a) of this subsec-
- tion is not resolved, the participant's case manager, in conjunction with the participant's
- person centered team members, shall assist the participant to locate a traditional waiver
- service provider of the participant's choice to provide the service.
- (c) A participant directed service shall not be terminated until a traditional service
- provider is ready to provide the service.
- 16 (10) Documentation of a participant directed service shall include:
- 17 (a) A timesheet; and
- (b) A note documenting each contact which shall include:
- 1. A full description of each service provided to support an outcome or outcomes in
- 20 the participant's POC;
- 2. The date of the service;
- 3. The location of the service;
- 4. The beginning and ending time of the service;

- 5. The signature and title of the person providing the service; and
- 2 6. The date the entry was made in the record; and
- 3 (c) Any applicable form for each service in accordance with Section 4 of this adminis-
- 4 trative regulation.
- 5 Section 6. Incident Reporting Process. (1) The following shall be the two (2) classes
- 6 of incidents:
- 7 (a) An incident; or
- 8 (b) A critical incident.
- 9 (2) An incident shall be any occurrence that impacts the health, safety, welfare, or
- 10 lifestyle choice of a participant and includes:
- 11 (a) A minor injury;
- (b) A medication error without a serious outcome; or
- (c) A behavior or situation which is not a critical incident.
- 14 (3) A critical incident shall be an alleged, suspected, or actual occurrence of an inci-
- 15 dent that:
- (a) Can reasonably be expected to result in harm to a participant; and
- 17 (b) Shall include:
- 1. Abuse, neglect, or exploitation;
- 19 2. A serious medication error;
- 20 3. Death;
- 4. A homicidal or suicidal ideation;
- 5. A missing person; or
- 6. Other action or event that the provider determines may result in harm to the partic-

- 1 ipant.
- 2 (4)(a) An incident shall:
- 1. Be documented on an Incident Report form; and
- 2. Be immediately assessed for potential abuse, neglect, or exploitation.
- 5 (b) If an assessment of an incident indicates the potential for abuse, neglect, or ex-
- 6 ploitation exists:
- 7 1. The individual who discovered or witnessed the incident shall immediately act to
- 8 ensure the health, safety, or welfare of the at-risk participant;
- 9 2. The incident shall immediately be considered a critical incident;
- 3. The critical incident procedures established in subsection (5) of this section shall
- 11 be followed;
- 4. The SCL provider shall report the incident to the participant's case manager and
- participant's guardian within twenty-four (24) hours of discovery of the incident;
- 5. The witness of the incident or the discovering agency's employee or volunteer
- shall record details of the incident on an Incident Report form;
- 6. A completed Incident Report form shall be retained on file by the SCL provider;
- 17 and
- 18 7. A copy of the completed Incident Report form shall be provided to the case man-
- agement agency providing case management to the participant.
- 20 (5)(a) If a critical incident occurs, the individual who witnessed the critical incident or
- 21 discovered the critical incident shall:
- 1. Immediately act to ensure the health, safety, and welfare of the at-risk participant;
- 23 2. Immediately report the critical incident to:

- a. The Department for Community Based Services, Adult Protective Services Branch
- or Child Protective Services Branch, as applicable:
- b. The participant's case manager;
- 4 c. The participant's guardian; and
- d. DBHDID, via fax, if abuse, neglect, or exploitation is suspected; and
- 3. Document the incident on a Critical Incident Report form.
- 7 (b) If the critical incident is not one which requires reporting of abuse, neglect, or ex-
- 8 ploitation, the critical incident shall be reported within eight (8) hours of discovery to:
- 1. The participant's case manager;
- 10 2. The participant's guardian; and
- 3. To BHDID by fax, unless it occurs after 4:30 p.m. Eastern Standard Time or on a
- weekend, in which case notification shall be sent to DBHDID on the following business
- 13 day.
- (c) The witness of the critical incident or the discovering agency's employee or volun-
- teer shall record details of the critical incident on a Critical Incident Report form.
- 16 (d) The SCL provider shall:
- 1. Conduct an immediate investigation and involve the participant's case manager in
- the investigation; and
- 2. Prepare a report of the investigation which shall include:
- a. Identifying information of the participant involved in the critical incident and the
- 21 person reporting the critical incident;
- b. Details of the critical incident; and
- 23 c. Relevant participant information including:

- 1 (i) Axis I diagnosis or diagnoses;
- 2 (ii) Axis II diagnosis or diagnoses;
- 3 (iii) Axis III diagnosis or diagnoses;
- 4 (iv) A listing of recent medical concerns;
- 5 (v) An analysis of causal factors; and
- 6 (vi) Recommendations for preventing future occurrences.
- 7 (e) The SCL provider shall:
- 8 1. Maintain the documentation of the critical incident required in this subsection at the
- 9 SCL provider's site; and
- 2. Provide a copy of the documentation to the case management agency of the par-
- 11 ticipant's case manager.
- 12 (6) An SCL provider shall submit, by fax, mortality data documentation following a
- death of a participant receiving services from the SCL provider to DBHDID within four-
- teen (14) days and include:
- (a) The participant's plan of care at the time of death;
- (b) Any current assessment forms regarding the participant;
- 17 (c) The participant's medication administration records from all service sites for the
- past three (3) months along with a copy of each prescription;
- (d) Progress notes regarding the participant from all service elements for the past
- 20 thirty (30) days;
- (e) The results of the participant's most recent physical exam;
- 22 (f) All incident reports, if any exists, regarding the participant for the past six (6)
- 23 months;

- 1 (g) Any medication error report, if any exists, related to the participant for the past six
- 2 (6) months;
- 3 (h) The most recent psychological evaluation of the participant;
- 4 (i) A full life history of the participant including any update from the last version of the
- 5 life history;
- 6 (j) Names and contact information for all staff members who provided direct care to
- 7 the participant during the last thirty (30) days of the participant's life;
- 8 (k) Emergency medical services notes regarding the participant if available;
- (I) The police report if available;
- 10 (m) A copy of:
- 1. The participant's advance directive, living will, or health care directive if applicable;
- 2. Any functional assessment of behavior or positive behavior support plan regarding
- the participant that has been in place over any part of the past twelve (12) months; and
- 3. The cardiopulmonary resuscitation and first aid card for any SCL provider's staff
- member who was present at the time of the incident which resulted in the participant's
- 16 death;
- (n) A record of all medical appointments or emergency room visits by the participant
- within the past twelve (12) months; and
- (o) A record of any crisis training for any staff member present at the time of the inci-
- 20 dent which resulted in the participant's death.
- 21 (7)(a) An SCL provider shall report a medication error to DBHDID by the fifteenth of
- the month following the error by completing the Medication Error Report Form.
- 23 (b) An SCL provider shall document all medication error details on a medication error

- 1 log retained on file at the SCL provider site.
- 2 Section 7. SCL Waiting List. (1)(a)c In order to be placed on the SCL waiting list, an
- 3 individual shall submit to DBHDID a completed MAP-620, Application for I/DD Services,
- 4 which shall include:
- 1. A signature from a physician or an SCL developmental disability professional indi-
- 6 cating medical necessity;
- 7 2. A current and valid intellectual or development disability diagnosis, including sup-
- 8 porting documentation to validate the diagnosis and age of onset; and
- 9 3. Completion of the Axis I, II, and III diagnoses list.
- (b) Supporting documentation to validate a diagnosis and age of onset shall include:
- 1. A psychological or psycho-educational report of the assessment results of at least
- an individual test of intelligence resulting in an intelligence quotient (IQ) score; and
- 2. The results of an assessment of adaptive behavior abilities which has been signed
- by the licensed psychologist, licensed psychological associate, certified psychologist
- with autonomous functioning, or certified school psychologist who prepared the report.
- (c) The IQ test referenced in paragraph (b)1. of this subsection shall:
- 1. Have been conducted before the age of eighteen (18) years for a diagnosis of in-
- tellectual disability or before the age of twenty-two (22) years for a diagnosis of a devel-
- 19 opmental disability; or
- 20 2. If a record of an IQ score prior to the age of eighteen (18) years for an applicant
- with an intellectual disability or prior to the age of twenty-two (22) years for an applicant
- with a developmental disability cannot be obtained, the following shall qualify as sup-
- 23 porting documentation to validate a diagnosis and age of onset:

- a. Individual education program documentation which contains an IQ score and a re-
- 2 port or description of adaptive behavior skills;
- b. The results of a psychological assessment submitted during the course of guardi-
- 4 anship proceedings; or
- 5 c. The results of a current psychological assessment which shall:
- 6 (i) Include evidence of onset prior to the age of eighteen (18) years for an intellectual
- 7 disability or the age of twenty-two (22) years for a developmental disability obtained
- 8 through a comprehensive developmental history; and
- 9 (ii) Provide documentation ruling out factors or conditions which may contribute to
- diminished cognitive and adaptive functioning, including severe mental illness, chronic
- 11 substance abuse, or medical conditions.
- (4) DBHDID shall validate a MAP-620 application information.
- (5) An individual's order of placement on the SCL waiting list shall be determined by
- the chronological date of receipt of a completed MAP-620 and by category of need of
- the individual as established in paragraphs (a) through (c) of this subsection.
- (a) An individual's category of need shall be the emergency category if an immediate
- service is needed as determined by any of the following if all other service options have
- 18 been explored and exhausted:
- 1. Abuse, neglect, or exploitation of the individual as substantiated by DCBS;
- 20 2. The death of the individual's primary caregiver and lack of a alternative primary
- 21 caregiver;
- 22 3. The lack of appropriate placement for the individual due to:
- 23 a. Loss of housing;

- b. Loss of funding; or
- c. Imminent discharge from a temporary placement;
- 4. Jeopardy to the health and safety of the individual due to the primary caregiver's
- 4 physical or mental health status; or
- 5. Imminent or current institutionalization.
- 6 (b) An individual's category of need shall be the urgent category if an SCL service is
- 7 needed within one (1) year; and
- 1. There is a threatened loss of the individual's existing funding source for supports
- 9 within the year due to the individual's age or eligibility;
- 2. The individual is residing in a temporary or inappropriate placement but the indi-
- vidual's health and safety is assured;
- 3. The individual's primary caregiver has a diminished capacity due to physical or
- mental status and no alternative primary caregiver exists; or
- 4. The individual exhibits an intermittent behavior or action that requires hospitaliza-
- tion or police intervention.
- (c) An individual's category of need shall be classified as future planning if an SCL
- service is needed in more than one (1) year; and
- 1. The individual is currently receiving a service through another funding source that
- meets the individual's needs;
- 20 2. The individual is not currently receiving a service and does not currently need the
- 21 service; or
- 22 3. The individual is in the custody of DCBS.
- 23 (6) A written notification of original placement on the SCL waiting list and any change

- due to a reconsideration shall be mailed to an individual or the individual's guardian and
- 2 case management provider if identified.
- 3 (7) In determining chronological status, the original date of receipt of a MAP-620 shall
- 4 be maintained and shall not change if an individual is moved from one (1) category of
- 5 need to another.
- 6 (8) If multiple applications are received on the same arrival date, a lottery shall be
- 7 held to determine placement on the SCL waiting list within each category of need.
- 8 (9) Maintenance of the SCL waiting list shall occur as established in this subsection.
- 9 (a) The department shall, at a minimum, annually update the waiting list information
- about an individual during the birth month of that individual.
- (b) The individual or individual's guardian and case management provider, if identi-
- fied, shall be contacted in writing to verify the accuracy of the information on the SCL
- waiting list and the individual's or individual's guardian's continued desire to pursue
- 14 placement in the SCL program.
- (c) If a discrepancy in diagnostic information is noted at the time of the annual up-
- date, the department may request a current diagnosis of intellectual or developmental
- disability signed by a physician or SCL IDP, including documentation supporting the di-
- 18 agnosis.
- (d) The information referenced in paragraph (c) of this subsection shall be received
- by the department within thirty (30) days from the date of the written request in order to
- 21 be considered timely.
- 22 (10) A reassignment of an individual's category of need shall be completed based on
- 23 updated information and the validation process.

- 1 (11) An individual or individual's guardian may submit a written request for considera-
- tion of movement from one (1) category of need to another if there is a change in status
- 3 of the individual.
- 4 (12)(a) The criteria for removal from the SCL waiting list shall be:
- 1. After a documented attempt, the department is unable to locate the individual or
- 6 the individual's guardian;
- 7 2. The individual is deceased;
- 8 3. A review of documentation reveals that the individual does not have an intellectual
- 9 or a developmental disability diagnosis;
- 4. A notification of potential SCL funding is made and the individual or the individual's
- guardian declines the potential funding and does not request to be maintained on the
- 12 SCL waiting list; or
- 5. Notification of potential SCL funding is made and the individual or the individual's
- guardian does not complete the enrollment process with DBHDID nor notify DBHDID of
- the need for an extension within sixty (60) days of the potential funding notice date.
- (b)1. A notification of need for an extension for good cause shall consist of a state-
- ment signed by the individual or the individual's guardian explaining the reason for the
- delay in accessing services, steps being taken to access services, and expected date to
- 19 begin utilizing services.
- 2. Upon receipt of documentation, the department shall grant, in writing, one (1) sixty
- 21 (60) day extension.
- 22 (13) If a notification of potential SCL funding is made and an individual or the individ-
- 23 ual's guardian declines the potential funding but requests to be maintained on the SCL

- 1 waiting list:
- 2 (a) The individual shall be placed in the appropriate category on the SCL waiting list;
- 3 and
- 4 (b) The chronological date shall remain the same.
- 5 (14) If an individual is removed from the SCL waiting list, DBHDID shall mail written
- 6 notification to the:
- 7 (a) Individual or the individual's guardian; and
- 8 (b) Individual's case management provider.
- 9 (15) The removal of an individual from the SCL waiting list shall not prevent the sub-
- mission of a new application at a later date.
- 11 (16) An individual shall be allocated potential funding based upon:
- 12 (a) Category of need;
- (b) Chronological date of placement on the SCL waiting list; and
- (c) Region of origin in accordance with KRS 205.6317(3) and (4).
- 15 (17) To be allocated potential funding, an individual residing in an institution shall
- meet the following criteria in addition to the criteria established in this section.
- (a) The individual's treatment professionals shall determine that an SCL placement is
- appropriate for the individual; and
- (b) The SCL placement is not opposed by the individual or the individual's guardian.
- Section 8. Use of Electronic Signatures. (1) The creation, transmission, storage, or
- other use of electronic signatures and documents shall comply with:
- (a) The requirements established in KRS 369.101 to 369.120; and
- 23 (b) All applicable state and federal statutes and regulations.

- 1 (2) An SCL service provider choosing to utilize electronic signatures shall:
- 2 (a) Develop and implement a written security policy which shall:
- 1. Be adhered to by all of the provider's employees, officers, agents, or contractors;
- 2. Stipulate which individuals have access to each electronic signature and password
- 5 authorization; and
- 3. Ensure that an electronic signature is created, transmitted, and stored in a secure
- 7 fashion;
- 8 (b) Develop a consent form which shall:
- 1. Be completed and executed by each individual utilizing an electronic signature;
- 10 2. Attest to the signature's authenticity; and
- 3. Include a statement indicating that the individual has been notified of his or her re-
- sponsibility in allowing the use of the electronic signature; and
- (c) Produce to the department a copy of the agency's electronic signature policy, the
- signed consent form, and the original filed signature immediately upon request.
- 15 (3) A participant or participant's guardian may choose to use an electronic signature
- and, if choosing to use an electronic signature, shall execute a consent form which
- 17 shall:

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- 1. Be completed and executed by each individual utilizing an electronic signature;
- 19 2. Attest to the signature's authenticity; and
- 3. Include a statement indicating that the individual has been notified of his or her re-
- 21 sponsibility in allowing the use of the electronic signature.
- Section 9. Employee Policies and Requirements Apply to Subcontractors. Any policy
- 23 or requirement established in this administrative regulation regarding an employee shall

- 1 apply to a subcontractor.
- 2 Section 10. Appeal Rights. (1) An appeal of a department decision regarding a Medi-
- 3 caid beneficiary based upon an application of this administrative regulation shall be in
- 4 accordance with 907 KAR 1:563.
- 5 (2) An appeal of a department decision regarding Medicaid eligibility of an individual
- 6 based upon an application of this administrative regulation shall be in accordance with
- 7 907 KAR 1:560.
- 8 (3) An appeal of a department decision regarding a provider based upon an applica-
- 9 tion of this administrative regulation shall be in accordance with 907 KAR 1:671.
- (4) The department shall not grant an appeal regarding a category of need determi-
- nation made pursuant to Section 7 of this administrative regulation.
- Section 11. Transition from 907 KAR 1:145. (1) There shall be a one (1) year transi-
- tion period, based on each recipient's birth month, to enable an individual who is receiv-
- ing SCL services in accordance with 907 KAR 1:145 on the effective date of this admin-
- istrative regulation to transition to receiving services in accordance with this administra-
- 16 tive regulation.
- 17 (2) During the one (1) year transition period, in the month of an SCL waiver recipi-
- ent's birthday, an SCL waiver recipient who remains approved to receive SCL waiver
- services shall transition to receiving services in accordance with this administrative reg-
- 20 ulation rather than in accordance with 907 KAR 1:145.
- 21 (3) Funding for the SCL waiver program shall be associated with and generated
- through SCL waiver program participants rather than SCL waiver service providers.
- 23 Section 12. Incorporation by Reference. (1) The following material is incorporated by

- 1 reference:
- 2 (a) The "Supports for Community Living Policy Manual", December 2012 edition;
- 3 (b) The "Person Centered Plan of Care", November 2012 edition;
- 4 (c) The "Supported Employment Long-Term Support Plan", December 2011 edition;
- 5 (d) The "Critical Incident Report", November 2012 edition;
- 6 (e) The "Incident Report", November 2012 edition;
- 7 (f) The "Person Centered Employment Plan", March 2012 edition;
- 8 (g) The "Person Centered Employment Plan Activity Note", July 2012 edition; and
- 9 (h) The "Medication Error Report Form", August 2012 edition.
- 10 (2) This material may be inspected, copied, or obtained, subject to applicable copy-
- right law, at the Department for Medicaid Services, 275 East Main Street, Frankfort,
- Kentucky 40621, Monday through Friday, 8 a.m. to 4:30 p.m. or online at the depart-
- ment's Web site at http://www.chfs.ky.gov/dms/incorporated.htm. (39 Ky.R. 690; 1239;
- 14 1431; eff. 2-1-2013.)